2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000143060

Address:

City-St-Zip:

C/O 130 ALDO RD

BABSON PARK, FL 33827

Entity Name: SHARPLESS CONSTRUCTION, INC.

FILED Apr 08, 2009 Secretary of State

Current P	rincipal Place of Business:	New Principal Place	New Principal Place of Business:	
130 ALDO BABSON I	PRD PARK, FL 33827 US			
Current N	lailing Address:	New Mailing Addres	s:	
P O BOX 2 BABSON I	270 PARK, FL 33827			
FEI Number	: 20-0442302 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of Current Registered Agent	: Name and Address o	of New Registered Agent:	
130 ALDO	SS, DANIEL G RD PARK, FL 33827 US			
The above in the State	e named entity submits this statement for t e of Florida.	the purpose of changing its registere	d office or registered agent, or both,	
SIGNATUI	RE:			
	Electronic Signature of Registered	Agent	Date	
Election Car	mpaign Financing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PT () Delete SHARPLESS, DANIEL G 130 ALDO RD BABSON, FL 33827	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () Delete SHARPLESS, ROBERT J C/O 130 ALDO RD BABSON, FL 33827	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () Delete SHARPLESS, HOLLY C/O 130 ALDO RD BABSON PARK, FL 33827	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	V () Delete KLEIN. CHRISTOPHER P	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: HOLLY SHARPLESS S 04/08/2009