

2006 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Sep 12, 2006 8:00 am**  
**Secretary of State**

09-12-2006 90010 015 \*\*\*555.00

**DOCUMENT # P03000156325**

1. Entity Name  
A.C. MENDOLIA CONSTRUCTION, INC.



Principal Place of Business  
8100 RIVER POINTE COURT  
ST. AUGUSTINE, FL 32092

Mailing Address  
8100 RIVER POINTE COURT  
ST. AUGUSTINE, FL 32092

**DO NOT WRITE IN THIS SPACE**



08312006 No Chg-P CR2E034 (11/05)

4. FEI Number  
45-0530543

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MENDOLIA, ANDREW C  
8100 RIVER POINTE COURT  
SAINT AUGUSTINE, FL 32092

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00**  
**Due by September 6, 2006**

9. Election Campaign Financing  
Trust Fund Contribution.

☒ **\$5.00 May Be**  
**Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PSTD  
MENDOLIA, ANDREW C  
8100 RIVER POINTE COURT  
SAINT AUGUSTINE, FL 32092

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Andrew C. Mendolia* **ANDREW C. MENDOLIA** 8/20/06 904-940-8880

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #