

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 27, 2007 08:00 A
Secretary of State

DOCUMENT # P04000001270

1. Entity Name
**CROM ENGINEERING AND CONSTRUCTION SERVICES,
INC.**



Principal Place of Business
**250 SW 36TH TERRACE
GAINESVILLE, FL 32607**

Mailing Address
**250 SW 36TH TERRACE
GAINESVILLE, FL 32607**



04262007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0484387

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BULL, STEPHEN M
111 NORTH ORANGE AVENUE
SUITE 950
ORLANDO, FL 32801**

**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 \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MALPASS, JEFFERY D
STREET ADDRESS	250 SW 36TH TERRACE
CITY-ST-ZIP	GAINESVILLE, FL 32607
TITLE	DST
NAME	CARLTON, WALTER R
STREET ADDRESS	250 SW 36TH TERRACE
CITY-ST-ZIP	GAINESVILLE, FL 32607
TITLE	D
NAME	BEVIS, GERALD C
STREET ADDRESS	250 SW 36TH TERRACE
CITY-ST-ZIP	GAINESVILLE, FL 32607
TITLE	D
NAME	LEISEY, RYAN J
STREET ADDRESS	250 SW 36TH TERRACE
CITY-ST-ZIP	GAINESVILLE, FL 32607
TITLE	D
NAME	COPLEY, JAMES D
STREET ADDRESS	250 SW 36TH TERRACE
CITY-ST-ZIP	GAINESVILLE, FL 32607
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

UD00000739599
05/11/07-80075-003 158.75

**DO NOT WRITE
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:

Walter R Carlton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Walter R Carlton, Director

04-26-07

Date

352-372-3436

Daytime Phone #