## **2006 FOR PROFIT CORPORATION** ANNUAL REPORT (AR)

## Feb 10, 2006 8:00 am Secretary of State DOCUMENT # P04000001277 1. Entity Name 02-10-2006 90013 003 \*\*\*150.00 ACTION GENERAL CONTRACTING, INC. Principal Place of Business Mailing Address 2103 41ST STREET WEST 2103 41ST STREET WEST BRADENTON FL 34205 **BRADENTON FL 34205** 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State City & State Applied For 4. FEI Number 20-0568995 Not Applicable Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FOBAIR, RICHARD C II Street Address (P.O. Box Number is Not Acceptable) 2103 41ST STREET WEST **BRADENTON FL 34205** 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. SIGNATURÈ (NOTE: Registered Agent signature FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. DIRECTOR / UP OF Estimating Change P/D HILE ☐ Delete TITLE FODAIR, RICHARDON FOBAIR, RICHARD C II NAME MAME STREET ADDRESS 2103 41ST STREET WEST STREET ADDRESS 2103-415+ St. WEST BRADENTON FL 34205 CITY-ST-7(P CITY-ST-ZIP RADENTON, FL PRESIDENT Change Change TITLE ☐ Delete TITLE FOBAIR, Richard C 2103-415+ St. WEST Addition NAME NAME FOBAIR, RICHARD C STREET ADDRESS 2103 41ST ST WEST STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **BRADENTON FL 34205** angiphA 🔲 mu □ Delete THE ☐ Change NAME NAME FOBAIR, SHERRY STREET ADDRESS STREET ADDRESS 2103 41ST ST WEST CITY.ST-7IP CITY-ST-ZIP **BRADENTON FL 34205** TITLE □ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY+ST-7IP Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-7IP ☐ Delete Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

FILED