## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P04000003296

1. Entity Name DAN DORSEY CONSTRUCTION, INC.

FILED Apr 16, 2007 08:00 AM Secretary of State

Principal Place of Business

1348 VERONA ST DAYTONA BEACH, FL 32114 Mailing Address

1348 VERONA ST

DAYTONA BEACH, FL 32114



## DO NOT WRITE IN THIS SPACE

| 02212007 No Chg-P           |  | CR2E034 (11/05) |                |  |
|-----------------------------|--|-----------------|----------------|--|
| 4. FEI Number<br>20-0580374 |  |                 | Applied For    |  |
|                             |  |                 | Not Applicable |  |
|                             |  |                 | •              |  |

5. Certificate of Status Desired See Required \$8.75 Additional

6. Name and Address of Current Registered Agent

TROUP, ROBERT G. 4343 A RIDGEWOOD AVENUE PORT ORANGE, FL 32127

## 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   |   | Election Campaign Fi     Trust Fund Contribution |   | \$5.00 May Be<br>Added to Fees        |   |  |  |
| 10.  | OFFICERS AND DIREC  | TORS   |   | · · · · · · · · · · · · · · · · · · · |   |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | D<br>DORSEY, DANNY R<br>1348 VERONA ST<br>DAYTONA BEACH, FL 32114 |  |   |                                       |   |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  |   |  | į |                                       | U00000707655<br>04/24/07-80082-020 150.00 |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  |   |  |   | DO                                    | NOT WRITE                                 |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  |   |  |   | IN '                                  | THIS SPACE                                |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  |   |  |   |                                       |   |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  |   |  |   |                                       |   |  |  |
| 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 embewered 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. |   |  |   |                                       |   |  |  |