## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000013865

FILED Apr 21, 2009 Secretary of State

Entity Name: NORTH CENTRAL FLORIDA RESIDENTIAL & COMMERCIAL CONSTRUCTION CO.

Current Principal Place of Business: New Principal Place of Business:

505 LAFAYETTE AVE LIVE OAK, FL 32064

Current Mailing Address: New Mailing Address:

P O BOX 6141 LIVE OAK, FL 32064

FEI Number: 61-1465553 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PERKINS, MAURICE E PERKINS, MAURICE E PRES. 505 LAFAYETTE AVE LIVE OAK, FL 32064 US PERKINS, MAURICE E PRES. 505 LAFAYETTE AVE LIVE OAK, FL 32064 US

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.

SIGNATURE: MAURICE E. PERKINS 04/21/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition PERKINS, MAURICE E PERKINS, MAURICE E PRES Name: Name: 505 LAFAYETTE AVE Address: 505 LAFAYETTE AVE Address: City-St-Zip: LIVE OAK, FL 32064 City-St-Zip: LIVE OAK, FL 32064

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.

SIGNATURE: MAURICE E. PERKINS OWNE 04/21/2009