

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000016571

**FILED**  
**Jun 18, 2009**  
**Secretary of State**

**Entity Name:** LOUIS PLASTERING & DRIVEWAYS, INC.

**Current Principal Place of Business:**

3448 ELM STREET  
ZOLFO SPRINGS, FL 33890

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 811  
ZOLFO SPRINGS, FL 33890

**New Mailing Address:**

**FEI Number:** 20-0653975

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LOUIS, ADNAUD  
3448 ELM STREET  
ZOLFO SPRINGS, FL 33890 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: LOUIS, ADNAUD  
Address: PO BOX 811  
City-St-Zip: ZOLFO SPRINGS, FL 33890

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ADNAUD LOUIS

P

06/18/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date