


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2008 8:00 am
Secretary of State

04-18-2008 90027 046 ***150.00

DOCUMENT # P04000038852 1. Entity Name GRT CONSTRUCTION, INC.					
Principal Place of Business 30706 WAY DR WESLEY CHAPEL, FL 33544			Mailing Address 30706 WAY DR WESLEY CHAPEL, FL 33544		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 90-0143921	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BOWLING, TAMMY L 30706 WAY DR WESLEY CHAPEL, FL 33544			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BOWLING, TAMMY L 30706 WAY DR WESLEY CHAPEL, FL 33544	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BOWLING, TAMMY L 30706 WAY DR ZEPHYRHILLS, FL 33544	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GRIMM, ROBERT A 30706 WAY DR WESLEY CHAPEL, FL 33544	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]	<input type="checkbox"/> Delete			
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: <i>Tammy L. Bowling</i>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date 3-28-08 Daytime Phone # 813 714-3725		



Litton Loan Servicing
4828 LOOP CENTRAL DRIVE
HOUSTON TX 77081-2212

ATTACHMENT

**IMPORTANT TAX RETURN
INFORMATION BELOW**

59956-109903-1



TAMMY L BOWLING
30706 WAY DR
WESLEY CHAPEL FL 33545-4412

40071429
P04000038852

CUSTOMER CARE DEPARTMENT
800-247-9727

PROPERTY ADDRESS:
30706 WAY DRIVE
WESLEY CHAP FL 33544

LOAN NUMBER 0015802838

SOCIAL SECURITY NUMBERS: 290-70-0630

☐ **CORRECTED** (if checked)

RECIPIENT'S/LENDER'S name, address and telephone number LITTON LOAN SERVICING LP 4828 LOOP CENTRAL DRIVE HOUSTON, TX 77081-2212	<i>* Caution: The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.</i>	OMB No. 1545-0901 2007 Form 1098																				
PAYER'S/BORROWER'S name, street address (including apt. no.), city, state and ZIP code TAMMY L BOWLING 30706 WAY DR WESLEY CHAPEL FL 33545-4412	<table border="1"> <tr> <td>1</td> <td>Mortgage interest received from payer(s)/borrower(s)*</td> <td>\$ 4,939.87</td> </tr> <tr> <td>2</td> <td>Points paid on purchase of principal residence</td> <td>\$.00</td> </tr> <tr> <td>3</td> <td>Refund of overpaid interest</td> <td>\$.00</td> </tr> <tr> <td>4</td> <td>Mortgage Insurance Premiums</td> <td>\$.00</td> </tr> <tr> <td>5</td> <td></td> <td></td> </tr> <tr> <td colspan="2"> RECIPIENT'S Federal Identification No. 13-3955897 </td> <td> PAYER'S social security number 290-70-0630 </td> </tr> <tr> <td colspan="3"> Account number (applicable to Form 1098) 0015802838 </td> </tr> </table>	1	Mortgage interest received from payer(s)/borrower(s)*	\$ 4,939.87	2	Points paid on purchase of principal residence	\$.00	3	Refund of overpaid interest	\$.00	4	Mortgage Insurance Premiums	\$.00	5			RECIPIENT'S Federal Identification No. 13-3955897		PAYER'S social security number 290-70-0630	Account number (applicable to Form 1098) 0015802838		
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Account number (applicable to Form 1098) 0015802838																						

The interest on the mortgage shown on lines 1, 2, 3, and 4 is tax deductible. Taxpayers are required to attach a statement of the amount of interest paid to their tax return if the amount of interest paid exceeds \$1,000. See instructions for Form 1098.

Form 1098

(Keep for your records)

Department of the Treasury - Internal Revenue Service

SEE REVERSE SIDE FOR ADDITIONAL DISCLOSURES.

ANNUAL TAX AND INTEREST STATEMENT

PRINCIPAL ACTIVITY		ESCROW ACTIVITY		INTEREST ACTIVITY	
Beginning Balance	49,264.46	Beginning Balance	.00	Interest Paid	4,876.35
Principal Paid	421.34	Deposits	.00	Late Charge Paid	63.52
Ending Balance	48,843.12	Property Taxes Pd.	.00	Total 1098 Interest	4,939.87
		Insurance Paid	1,492.93		
		Ending Balance	-1,492.93		

Should you have any questions regarding this notice, please contact our Customer Care Department at (800) 247-9727 or visit our website at www.littonloan.com.