

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000042345

Entity Name: LINZY CONSTRUCTION COMPANY, INC.

FILED
Apr 24, 2009
Secretary of State

Current Principal Place of Business:

5865 TRAVIS BYNUM ROAD
JAY, FL 32565

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 383
JAY, FL 32565

New Mailing Address:

5865 TRAVIS BYNUM ROAD
JAY, FL 32565

FEI Number: 87-0722090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, DAVID G
204 CHURCH STREET EAST
PENSACOLA, FL 32501 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: LINZY, JOE M
Address: 6543 DANIEL GRIFFIS ROAD
City-St-Zip: JAY, FL 32565

Title: V () Delete
Name: LINZY, JODY M
Address: 6543 DANIEL GRIFFIS ROAD
City-St-Zip: JAY, FL 32565

Title: S () Delete
Name: LINZY, JOE M
Address: 6543 DANIEL GRIFFIS RD
City-St-Zip: JAY, FL 32565

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: LINZY, JOE M
Address: 5865 TRAVIS BYNUM ROAD
City-St-Zip: JAY, FL 32565

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

Title: S (X) Change () Addition
Name: LINZY, JOE M
Address: 5865 TRAVIS BYNUM ROAD
City-St-Zip: JAY, FL 32565

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: JOE M. LINZY

PSD

04/24/2009

Electronic Signature of Signing Officer or Director

Date