

2005 FOR PROFIT CORPORATION ANNUAL REPORT

5/ **FILED**
May 25, 2005 8:00 am
Secretary of State

05-02-2005 90388 011 ***150.00

DOCUMENT # P04000054976

1. Entity Name
BRIAN EHLERS CONSTRUCTION COMPANY, Inc.



Principal Place of Business
**2347 SE 17TH STREET
OCALA, FL 34471**

Mailing Address
**2347 SE 17TH STREET
OCALA, FL 34471**

2. Principal Place of Business
2102 SW 20th Pl. #303
Suite, Apt. #, etc.

3. Mailing Address
P. O. Box 6978
Suite, Apt. #, etc.

City & State
Ocala, FL 34474
Zip Country

City & State
Ocala, FL 34478
Zip Country

03212005 Chg-P CR2E034 (10/03)

4. FEI Number
20-0934707

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**EHLERS, BRIAN E.
2347 SE 17TH STREET
OCALA, FL 34471**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
1803 SE 85th Street Rd.
City
Ocala FL 34480

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 re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**President
Brian Ehlers
1803 SE 85th Street Rd.
Ocala, FL 34480**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

Brian Ehlers
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Brian E. Ehlers

4-26-05 352-861-4333

Date Daytime Phone #