2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000059087

1. Entity Name

FIRST AMERICAN STEEL ERECTORS CORPORATION



FILED Mar 17, 2008 08:00 A Secretary of State

Principal Place of Business

267 CLERMONT AVE LAKE MARY, FL 32746 Mailing Address

267 CLERMONT AVE LAKE MARY, FL 32746



DO NOT WRITE IN THIS SPACE

03102008 No Chg-P CR2E034 (11/05)

 4. FEI Number
 Applied For

 65-1223803
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DOXTATER, VANROY R 267 CLERMONT AVE LAKE MARY, FL 32746

DO NOT WRITE IN THIS SPACE

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 reinstating) DATE OF THE REGISTER SIGNATURE Signature required when reinstating)						
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution			cing	\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DOXTATER, VANROY R 267 CLERMONT AVE LAKE MARY, FL 32746				0000009\$1301 04/03/08-30003-020 153.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DOXTATER, JAN M 267 CLERMONT AVE LAKE MARY, FL 32746					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DOXTATER, MONTE R 441 GEHR LN LAKE MARY, FL 32746			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DOXTATER, KEVIN L 194 S 4TH ST LAKE MARY, FL 32746		IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY STATIP						

12. Thereby 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:

JUIU // CX JUIU TUIL

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/18 (407)328-9523