

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2008 08:00 AM
Secretary of State

DOCUMENT # P04000080387

1. Entity Name
EMERGE CONSTRUCTION SUPPLIES AND SERVICES, INC.



Principal Place of Business
**1665 PALM BEACH LAKES BLVD
SUITE 520
WEST PALM BEACH, FL 33401**

Mailing Address
**1665 PALM BEACH LAKES BLVD
SUITE 520
WEST PALM BEACH, FL 33401**



01312008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **01-0816168** Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**THOMAS-ANTHONY, TAMMY
1665 PALM BEACH LAKES BLVD
SUITE 520
WEST PALM BEACH, FL 33401**

**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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D**
NAME **THOMAS-ANTHONY, TAMMY**
STREET ADDRESS **1665 PALM BEACH LAKES BLVD, SUITE 520**
CITY-ST-ZIP **WEST PALM BEACH, FL 33401**

TITLE **D**
NAME **ANTHONY, CLARENCE E**
STREET ADDRESS **1665 PALM BEACH LAKES BLVD., SUITE 520**
CITY-ST-ZIP **WEST PALM BEACH, FL 33401**

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02/13/08-80010-023 158.75

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IN THIS SPACE**

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: *Tammy Thomas Anthony*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-31-08
Date

561-683-2221
Daytime Phone #