

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000081748

FILED  
Mar 17, 2008  
Secretary of State

Entity Name: FLORIDA STYLE CONSTRUCTION, INC.

## Current Principal Place of Business:

2932 NW 18TH TERRACE  
CAPE CORAL, FL 33993

## New Principal Place of Business:

## Current Mailing Address:

2932 NW 18TH TERRACE  
CAPE CORAL, FL 33993

## New Mailing Address:

FEI Number: 20-1152073

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHUTT, DARRIN R ESQ.  
SUITE C  
1105 CAPE CORAL PARKWAY EAST  
CAPE CORAL, FL 33904 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: PD ( ) Delete  
Name: MARTIN, MICHAEL S  
Address: 2932 NW 18TH TERRACE  
City-St-Zip: CAPE CORAL, FL 33993

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: MARTIN, MICHAEL S  
Address: 2932 NW 18TH TERRACE  
City-St-Zip: CAPE CORAL, FL 33993 US

Title: VP ( ) Change (X) Addition  
Name: CRANFORD, KATHERINE M VICE PR  
Address: 3417 SE 16TH PLACE  
City-St-Zip: CAPE CORAL, FL 33904 US

Title: SEC ( ) Change (X) Addition  
Name: CRANFORD, JOHN H SEC  
Address: 3417 SE 16TH PLACE  
City-St-Zip: CAPE CORAL, FL 33904 US

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: MICHAEL S. MARTIN

PD

03/17/2008

Electronic Signature of Signing Officer or Director

Date