

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 09, 2007 8:00 am
Secretary of State

04-09-2007 90038 008 ***150.00

DOCUMENT # P04000096895

1. Entity Name

RBE CONSTRUCTION COMPANY INC.



Principal Place of Business

630 SOUTHWEST 10TH STREET
TRENTON FL 32693

Mailing Address

POST OFFICE BOX 1265
TRENTON FL 32693



2. Principal Place of Business - No P.O. Box #

8050 SW 76th St

3. Mailing Address

P.O. Box 1265

Suite, Apt. #, etc.

Trenton, FL

Suite, Apt. #, etc.

Trenton, FL

City & State

32693 USA

City & State

32693 USA

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/06)

4. FEI Number

14-1910714

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KITTRELL, RANDY L PD
630 SW 10TH ST
TRENTON FL 32693

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Randy L. Kittrell

Randy L. Kittrell President 3-14-07

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, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	KITTRELL, RANDY L	
STREET ADDRESS	630 SOUTHWEST 10TH STREET	
CITY-ST-ZIP	TRENTON FL 32693	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	KNIGHT, JOHN	
STREET ADDRESS	630 SOUTHWEST 10TH STREET	
CITY-ST-ZIP	TRENTON FL 32693	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	KITTRELL, SCOTT A	
STREET ADDRESS	630 SOUTHWEST 10TH STREET	
CITY-ST-ZIP	TRENTON FL 32693	
TITLE	STD	<input type="checkbox"/> Delete
NAME	KITTRELL, BARBARA P	
STREET ADDRESS	630 SOUTHWEST 10TH STREET	
CITY-ST-ZIP	TRENTON FL 32693	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Randy L. Kittrell* Randy L. Kittrell

3-14-07

352-493-0342

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #