

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000101314

FILED
Jul 16, 2007
Secretary of State

Entity Name: TIGHT N RIGHT CONSTRUCTION INC

Current Principal Place of Business:

14163 DRAKES POINT DR
JACKSONVILLE, FL 32224 US

New Principal Place of Business:

Current Mailing Address:

14163 DRAKES POINT DR
JACKSONVILLE, FL 32224 US

New Mailing Address:

FEI Number: 20-1331633

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENDA, JULIE A
14163 DRAKES POINT DR
JACKSONVILLE, FL 32224 US

Name and Address of New Registered Agent:

ALL FLORIDA FIRM INC
813 DELTONA BLVD
SUITE A
DELTONA, FL 32725 US

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: JAMISON MARK JESSUP SR

07/16/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BENDA, JULIE A
Address: 14163 DRAKES POINT DR
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: VP () Delete
Name: SMITH, GREG E
Address: 14163 DRAKES POINT DR
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: S () Delete
Name: PARNELL, WALTER
Address: 14163 DRAKES POINT DR
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: T () Delete
Name: LEMASTERS, KENNY
Address: 620 6TH AVE S
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JULIE BENDA

PRES

07/16/2007

Electronic Signature of Signing Officer or Director

Date