


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jul 05, 2005 8:00 am**  
**Secretary of State**

05-02-2005 90525 038 \*\*\*158.75

**DOCUMENT # P04000101473**

1. Entity Name  
**DEVOTO CONSTRUCTION OF SOUTHWEST FLORIDA, INC.**



**66024126**



Principal Place of Business  
**2234 COLONIAL BLVD  
 FT MYERS, FL 33907**

Mailing Address  
**2234 COLONIAL BLVD  
 FT MYERS, FL 33907**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip Country

04192005 Chg-P CR2E034 (10/03)

4. FEI Number  
**20-1343949**

Applied For  
 Not Applicable

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

**6. Name and Address of Current Registered Agent**

**SMITH, DARRELL C  
 101 E KENNEDY BLVD STE 2800  
 TAMPA, FL 33602**

**7. Name and Address of New Registered Agent**

Name  
**DAVID KOENINGER**

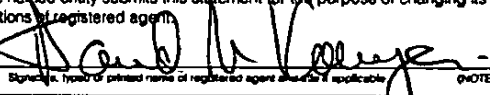
Street Address (P.O. Box Number is Not Acceptable)  
**2234 Colonial Blvd**

City  
**FT MYERS**

State  
**FL**

Zip Code  
**33907**

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:  DATE: **4/28/05**

Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when retreating)

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**


**10. OFFICERS AND DIRECTORS**

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
D	DOSORETZ, DANIEL E	2234 COLONIAL BLVD	FT MYERS, FL 33907	<input type="checkbox"/>
D	ANDISCO, RICARDO	2234 COLONIAL BLVD	FT MYERS, FL 33907	<input type="checkbox"/>
D	KOENINGER, DAVID	2234 COLONIAL BLVD	FT MYERS, FL 33907	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
		13221 PONDEROSA WAY	FT. MYERS FL 33901	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		6916 ERIN MARIE CT.	FT. MYERS FL 33919	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		18040 MONTELAGO CT.	FT. MYERS FL 33913	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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:  DATE: **4/28/05**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR