## 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000136649

Entity Name: DUKE CONSTRUCTION CORP.

**FILED** Oct 06, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

718 WEST AVE 4909 US HWY 1 PORT ST JOHN, FL 32927 SUITE B 49

UNICORPOR. DIST. 1, FL 32927

**Current Mailing Address: New Mailing Address:** 

718 WEST AVE 3550 N INDIAN RIVER DRIVE

PORT ST JOHN, FL 32927 COCOA, FL 32926

FEI Number: 20-1758888 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

MAGGARD, JACK A MAGGARD, JACK A 718 WEST AVE 3550 N INDIAN RIVER DRIVE PORT ST JOHN, FL 32927 US COCOA, FL 32926

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: JACK A MAGGARD 10/06/2008

> 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: (X) Change ( ) Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete MAGGARD, JACK A MAGGARD, JACK A Name: Name: 718 WEST AVE 3550 N INDIAN RIVER DRIVE Address: Address:

City-St-Zip: PORT ST JOHN, FL 32927 City-St-Zip: COCOA, FL 32926

Title: Title: (X) Change ( ) Addition () Delete

Name: MAGGARD, KIMBERLY A Name: MAGGARD, KIMBERLY A 718 WEST AVE 3550 N INDIAN RIVER DRIVE Address: Address:

PORT ST JOHN, FL 32927 COCOA, FL 32926 City-St-Zip: City-St-Zip:

( ) Delete Title: Title: (X) Change ( ) Addition YEHNERT, JR, WILLIAM E Name: YEHNERT, JR, WILLIAM E Name: 718 WEST AVENUE 3550 N INDIAN RIVER DRIVE Address: Address:

City-St-Zip: PORT ST. JOHN, FL 32927 City-St-Zip: COCOA, FL 32926

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: JACK A MAGGARD D, P 10/06/2008