

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Aug 16, 2005 8:00 am**  
**Secretary of State**

08-16-2005 90041 032 \*\*\*150.00

**DOCUMENT # P04000139437**

1. Entity Name

**NORTHEAST FLORIDA CONTRACTORS, INC.**



Principal Place of Business

**241819 CR 121  
HILLIARD FL 32046  
US**

Mailing Address

**241819 CR 121  
HILLIARD FL 32046  
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**201708911**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

1st MOORE

CR2E034 (10/04)

6. Name and Address of Current Registered Agent

**RAY, JUDY R  
241819 CR 121  
HILLIARD FL 32046**

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

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, 2005 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 **P** ☐ Delete  
NAME **RAY, JUDY R**  
STREET ADDRESS **241819 CR 121**  
CITY-ST-ZIP **HILLIARD FL 32046**

TITLE **V** ☐ Delete  
NAME **RAY, KEVIN A**  
STREET ADDRESS **241817 CR 121**  
CITY-ST-ZIP **HILLIARD FL 32046**

TITLE **V** ☐ Delete  
NAME **RAY, DOUGLAS E**  
STREET ADDRESS **241819 CR 121**  
CITY-ST-ZIP **HILLIARD FL 32046**

TITLE **V** ☐ Delete  
NAME **RAY, WILLIAM A**  
STREET ADDRESS **28247 PIKE RD**  
CITY-ST-ZIP **HILLIARD FL 32046**

TITLE **Officer** ☐ Delete  
NAME **Richard A. Vickers**  
STREET ADDRESS **450931 Old Dixie Hwy**  
CITY-ST-ZIP **Callahan, FL 32011**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

*Judy R. Ray*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**8-11-05**  
Date

**904-845-7756**  
Daytime Phone #

ATTACHMENT

50061918  
#P04000139437

To whom it may concern:

Attached you will find a copy of the 2005 For Profit Corporation Annual Report. This is the end of our first year of being incorporated, well in October. This form was not received until the end of June and that is why it is late.

Thank you,  
Gudy R. Ray  
President