

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000141583

FILED
May 07, 2008
Secretary of State

Entity Name: F. PALHANO CONSTRUCTION CORP.

Current Principal Place of Business:

6887 NICHOLS CREEK DR
JACKSONVILLE, FL 32222 US

New Principal Place of Business:

9445 BROKEN OAK BLVD
JACKSONVILLE, FL 32257 US

Current Mailing Address:

6887 NICHOLS CREEK DR
JACKSONVILLE, FL 32222 US

New Mailing Address:

9445 BROKEN OAK BLVD
JACKSONVILLE, FL 32257 US

FEI Number: 20-1756121

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALHANO, ANTONIO F
6887 NICHOLS CREEK DR
1628
JACKSONVILLE, FL 32222 US

Name and Address of New Registered Agent:

KELSAM SERVICES INC
9471 BAYMEADOWS RD
104
JACKSONVILLE, FL 32256 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: ROSELY DEQUINO

05/07/2008

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: S () Delete
Name: PALHANO, ROSANY
Address: 6887 NICHOLS CREEK DR
City-St-Zip: JACKSONVILLE, FL 32222 US

Title: CEO () Delete
Name: PRESTES, ORLANDIR
Address: 10961 BURNT MILL RD. #162B
City-St-Zip: JACKSONVILLE, FL 32256

Title: P (X) Delete
Name: PALHANO, ANTONIO F
Address: 6887 NICHOLS CREEK DR
City-St-Zip: JACKSONVILLE, FL 3222

Title: T () Delete
Name: PALHANO, ANTONIO F JR
Address: 6887 NICHOLS CREEK DR
City-St-Zip: JACKSONVILLE, FL 32222 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: PALHANO, ROSANY
Address: 9445 BROKEN OAK BLVD
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: P (X) Change () Addition
Name: PALHANO, ANTONIO F
Address: 9445 BROKEN OAK BLVD
City-St-Zip: JACKSONVILLE, FL 32257

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: ANTONIO F PALHANO

P

05/07/2008

Electronic Signature of Signing Officer or Director

Date