

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000146883

**FILED**  
**Apr 08, 2007**  
**Secretary of State**

**Entity Name:** SUGGS CONSTRUCTION GROUP, INC.

**Current Principal Place of Business:**

572 W RAMBLING DR  
WELLINGTON, FL 33414

**New Principal Place of Business:**

9600 SW FLOWERMOUND CIRCLE  
PORT SAINT LUCIE, FL 34987

**Current Mailing Address:**

572 W RAMBLING DR  
WELLINGTON, FL 33414

**New Mailing Address:**

9600 SW FLOWERMOUND CIRCLE  
PORT SAINT LUCIE, FL 34987

FEI Number: 20-1794798

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SUGGS, JUSTIN  
572 W RAMBLING DR  
WELLINGTON, FL 33414 US

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

SUGGS, JUSTIN  
9600 SW FLOWERMOUND CIRCLE  
PORT SAINT LUCIE, FL 34987 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: JUSTIN SUGGS

04/08/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SUGGS, JUSTIN  
Address: 572 W RAMBLING DR  
City-St-Zip: WELLINGTON, FL 33414 US

Title: S ( ) Delete  
Name: SUGGS, JUSTIN  
Address: 572 W. RAMBLING DR  
City-St-Zip: WELLINGTON, FL 33414 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: SUGGS, JUSTIN  
Address: 9600 SW FLOWERMOUND CIRCLE  
City-St-Zip: PORT SAINT LUCIE, FL 34987 US

Title: S (X) Change ( ) Addition  
Name: SUGGS, JUSTIN  
Address: 9600 SW FLOWERMOUND CIRCLE  
City-St-Zip: PORTSAINT LUCIE, FL 34987 US

I hereby certify that the information supplied with this filing does not qualify for the 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: JUSTIN SUGGS

PD

04/08/2007

Electronic Signature of Signing Officer or Director

Date