

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000156025

Entity Name: TRICON BUILDERS, INC.

FILED  
Jan 04, 2007  
Secretary of State

## Current Principal Place of Business:

2178 CHAIRES CROSS ROAD  
TALLAHASSEE, FL 32317

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 13993  
TALLAHASSEE, FL 32317

## New Mailing Address:

FEI Number: 20-1899742

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PADGETT, TIMOTHY D ESQ.  
2810 REMINGTON GREEN CIRCLE  
TALLAHASSEE, FL 32308 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: HATFIELD, FRED J  
Address: 8588 US HWY 90  
City-St-Zip: LIVE OAK, FL 32060

Title: D ( ) Delete  
Name: NASH, JAMES N III  
Address: 2178 CHAIRES CROSS ROAD  
City-St-Zip: TALLAHASSEE, FL 32317

Title: D ( ) Delete  
Name: CRAWFORD, JASON D  
Address: 10035 COLLINS HOLE RD.  
City-St-Zip: TALLAHASSEE, FL 32312

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: JASON D CRAWFORD

TREA

01/04/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date