

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000169324

FILED  
Jan 04, 2010  
Secretary of State

**Entity Name:** FRAGATA CONSTRUCTION COMPANY, INC.

**Current Principal Place of Business:**

4865 PALM COAST PARKWAY  
SUITE 4  
PALM COAST, FL 32137

**New Principal Place of Business:**

4 PRINCESS KIM LANE  
PALM COAST, FL 32164

**Current Mailing Address:**

4865 PALM COAST PARKWAY  
SUITE 4  
PALM COAST, FL 32137

**New Mailing Address:**

P.O. BOX 351124  
PALM COAST, FL 32135

**FEI Number:** 20-2038637

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FRAGATA, OCTAVIO  
4 PRINCESS KIM LANE  
PALM COAST, FL 32164 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  
Name: FRAGATA, OCTAVIO  
Address: 4 PRINCESS KIM LANE  
City-St-Zip: PALM COAST, FL 32164

Title: P  
Name: FRAGATA, OCTAVIO  
Address: 4 PRINCESS KIM LANE  
City-St-Zip: PALM COAST, FL 32164

Title: T  
Name: FRAGATA, OCTAVIO  
Address: 4 PRINCESS KIM LANE  
City-St-Zip: PALM COAST, FL 32164

Title: S  
Name: FRAGATA, SONYA L  
Address: 4 PRINCESS KIM LANE  
City-St-Zip: PALM COAST, FL 32164

I hereby 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 all other like empowered.

**SIGNATURE:** SONYA FRAGATA

S

01/04/2010

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

\_\_\_\_\_  
Date