


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT # P04000172856**  
 1. Entity Name  
**ANVIL CONSTRUCTION, INC.**



Principal Place of Business  
**18271 SE 11TH PLACE  
 WILLISTON, FL 32696**

Mailing Address  
**18271 SE 11TH PLACE  
 WILLISTON, FL 32696**

**DO NOT WRITE IN THIS SPACE**

**FILED**  
 06 SEP 18 AM 9:02  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA



07192006 No Chg-P CR2E034 (11/05)

4. FEI Number <b>20-2079697</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**KIMBALL, KIM  
 18271 SE 11TH PLACE  
 WILLISTON, FL 32696**

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
 Due by September 6, 2006**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>P KIMBALL, DAN 18271 SE 11TH PLACE WILLISTON, FL 32696</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>VP KIMBALL, KIM 18271 SE 11TH PLACE WILLISTON, FL 32696</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**300080002563**  
 09/20/06--01053--003 \*\*150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:** *Kim Kimball* **7/19/06** <sup>(352)</sup> 318-5800  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

*7/19/06*