## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000001660

HAGERMAN, JÁMIE E

59 CRAYCROFT AVE

DEBARY, FL 32713

Name:

Address:

City-St-Zip:

FILED May 31, 2006 Secretary of State

Entity Nar	ne: HAGERN	MAN CONSTRUCTION, INC.					
Current Principal Place of Business:			New Prince	New Principal Place of Business:			
59 CRAYC DEBARY, I	ROFT AVE FL 32713						
Current Mailing Address:			New Maili	New Mailing Address:			
59 CRAYO DEBARY, I	ROFT AVE FL 32713						
FEI Number:	20-2107866	FEI Number Applied For ( )	FEI Number Not Appl	icable ( )	Certificate of Status Desire	ed ( )	
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
SLUTSKY, ERWIN H 582 N. VOLUSIA AVE ORANGE CITY, FL 32713 US			59 CRÁYC	JAMIE, HAGERMAN 59 CRAYCROFT AVE. DEBARY, FL 32713 US			
	named entity of Florida.	submits this statement for the	ourpose of changing i	ts registered o	ffice or registered agent,	or both,	
SIGNATUR	RE: JAMIE H	AGERMAN			05/31/2006		
	Electro	nic Signature of Registered Ag	ent		Date		
		93(2)(b), F.S., the corporation did n g Trust Fund Contribution ( ).	ot receive the prior notic	e.			
OFFICERS	S AND DIREC	CTORS:	ADDITION	IS/CHANGES	TO OFFICERS AND DI	RECTORS:	
Title: Name: Address: City-St-Zip:	,		Title: Name: Address: City-St-Zip:	( )	) Change ()Addition		
Title: Name: Address: City-St-Zip:	S ( ZIMMERMAN, 106 FIRST STI DEBARY, FL	REET	Title: Name: Address: City-St-Zip:	T (X ZIMMERMAN, 3 106 FIRST STF DEBARY, FL 3	REET		
Title: Name: Address: City-St-Zip:	VP ( MOCK, KENNE 104 1ST STRE DEBARY, FL	ET	Title: Name: Address: City-St-Zip:	VP/S (X HAGERMAN, JA 59 CRAYCROF DEBARY, FL 3	T AVE.		
Title:	Т (Х	() Delete	Title:	( )	) Change ()Addition		

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JAMIE E HAGERMAN VΡ 05/31/2006