

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 11, 2006 8:00 am
Secretary of State

07-11-2006 90019 030 ***158.75

DOCUMENT # P05000033635 1. Entity Name COTHERN CONSTRUCTION COMPANY																													
Principal Place of Business 5450 GROVEWOOD CIRCLE PUNTA GORDA, FL 33982 US			Mailing Address 5450 GROVEWOOD CIRCLE PUNTA GORDA, FL 33982 US																										
2. Principal Place of Business Suite, Apt. #, etc. 4376 Harbor Blvd City & State Port Charlotte, Florida Zip 33952 Country US			3. Mailing Address Suite, Apt. #, etc. 4376 Harbor Blvd City & State Pt. Charlotte, Florida Zip 33952 Country U.S.																										
4. FEI Number 20-2446231			Applied For <input type="checkbox"/> Not Applicable																										
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required			07062006 Chg-P CR2E034 (11/05)																										
6. Name and Address of Current Registered Agent COTHERN, VOLMEY 5450 GROVEWOOD CIRCLE PUNTA GORDA, FL 33982			7. Name and Address of New Registered Agent Name COTHERN, VOLNEY Street Address (P.O. Box Number is Not Acceptable) 4376 Harbor Blvd City PORT CHARLOTTE FL Zip Code 33952																										
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 Volney Cothorn 7-6-06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																													
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">D</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>COTHERN, VOLMEY</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>5450 GROVEWOOD CIRCLE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>PUNTA GORDA, FL 33982</td> <td></td> </tr> </table>			TITLE	D	<input type="checkbox"/> Delete	NAME	COTHERN, VOLMEY		STREET ADDRESS	5450 GROVEWOOD CIRCLE		CITY-ST-ZIP	PUNTA GORDA, FL 33982		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">COTHERN, VOLNEY</td> <td style="width: 20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>4376 HARBOR BLVD</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>PORT CHARLOTTE, FL 33952</td> <td></td> </tr> </table>			TITLE	COTHERN, VOLNEY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	4376 HARBOR BLVD		STREET ADDRESS	PORT CHARLOTTE, FL 33952				
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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: Volney Cothorn 7-6-06 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																													

941-628-1277