2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 25, 2008 8:00 am Secretary of State

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1. Entity Name	ILDING & COI	0500006640 NSTRUCTION,				Anna	2819		
Principal Place of Business			Mailing Address			4,000	2020		
3818 CALUSA PT.			3818 CALUSA PT.						
CRYSTAL RIVER, FL 34428 US			CRYSTAL RIVER, FL 34428 US				9 (1)	1 1 A.	***
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X 5 5 5 5 1 5	leas at Divisional N	- BO Bout	3. Mailing Address						
2. Principal Place of Business - No P.O. Box # 6746 E GENTRY ST			6746 E GENIRY SI				BOTOL BYNEF O'DIEF DOWN MONTH	MIRIO OFFICE OFFICE OF	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			-	01 - D	0000004404	0.00
						01232008	Chg-P	CR2E034 (12/	UB)
City & State			City & State			4. FEI Numbe			Applied For
INVERVESS, FL 34452			INVERVESS, FL 34452		20-2931491			Not Applicable	
Žip	Cour	· .	Zip	Country USA		5. Certificate	of Status Desired	\$8.75	Additional
34452	US7		34452		- · ·	7 Name and	Address of New D	Fee Rec	quired
	6. Name and Ac	Idress of Current Re	gistered Agent		vame	7. Name and	Address of New R	egistered Agent	
GENTRY, KERMIT M JR 3818 CALUSA PT. 3 CRYSTAL RIVER, FL 34428					GENIRY, KERMIT M JR Street Address (P.O. Box Number is Not Acceptable) 6746 E GENIRY SI				
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					INVERVESS FL Zip Code				
							<u> </u>		
	e named entity submittions of registered ag		e purpose of changing its	registered o	office or reg	jistered agent, or bot	h, in the State of Flo	orida. I am familiar	with, and accept
ino obligat	adis of registorial ag	уо. н.			_				
SIGNATURE.								DATE	
<u> </u>	Signature, lyped or printed	name of registered agent and	пин парижение. (поте.	.: неокиетеа Ад	eni signatire re	rlokég wysaktenzistská)		DAIE	
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Trust Fund Contrib						\$5.00 May Be Added to Fees			
10.		OFFICERS AND DI	RECTORS	11.		ADDITIONS/	CHANGES TO OFF	ICERS AND DIREC	TORS IN 11
INTE	P		☐ Delete	TITLE	P	,		K) Cha	inge Addition
NAME	GENTRY, KERN	MIT M JR		NAME		ENIRY, KERMI	r M JR		
STREET ADDRESS	3818 CALUSA F			SIREE1 A					
CHTY-ST-ZIP					ZIP	746 E ŒNIRY Inverness, Fl	34452		
TITLE	VP	.,	Delete	TITLE	MP.	NIRY, KELEY		Cha	enge 🔲 Addition
NAME CURLET ADDRESS	GENTRY, KELL			NAME	I .	746 E ŒNIRY	cm:		
STREET ADDRESS CHY ST-ZIP	3818 CALUSA P			STREET A					
	OKTOTALITA	17,112 04420	Deleie		<u> 11</u>	NVERNESS// FL	J14JZ.	[nan Dadda:
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CITY-ST-ZIP	<u> </u>			CITY-ST	- ZIP		···		
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NAME	}			NAME	ranacce				
STREET ADDRESS	1			SIREELA	ADDRESS				

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statules. 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 Statules; 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.

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE: Kenn M Gents Kern TM Gentry 1-30-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNAMS OF FICER OR DIRECTOR DELE DAYLOR PROPER