

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000085168

FILED  
Apr 17, 2007  
Secretary of State

Entity Name: SCHANTZ CONSTRUCTION CORPORATION

## Current Principal Place of Business:

1150 LEMARS AVE  
PORT CHARLOTTE, FL 33948

## New Principal Place of Business:

6724 BEEDLA STREET  
NORTH PORT, FL 34286

## Current Mailing Address:

1150 LEMARS AVE  
PORT CHARLOTTE, FL 33948

## New Mailing Address:

6724 BEEDLA STREET  
NORTH PORT, FL 34286

FEI Number: 20-2991627

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SCHANTZ, CARRIE  
1150 LEMARS AVE  
PORT CHARLOTTE, FL 33948 US

## Name and Address of New Registered Agent:

SCHANTZ, CARRIE  
6724 BEEDLA STREET  
NORTH PORT, FL 34286 US

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: CARRIE SCHANTZ

04/17/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SCHANTZ, RICK  
Address: 1150 LEMARS AVE  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: VP ( ) Delete  
Name: SCHANTZ, CARRIE  
Address: 1150 LEMARS AVE  
City-St-Zip: PORT CHARLOTTE, FL 33948

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SCHANTZ, RICK  
Address: 6724 BEEDLA STREET  
City-St-Zip: NORTH PORT, FL 34286

Title: VP (X) Change ( ) Addition  
Name: SCHANTZ, CARRIE  
Address: 6724 BEEDLA STREET  
City-St-Zip: NORTH PORT, FL 34286

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.

SIGNATURE: CARRIE SCHANTZ

V

04/17/2007

Electronic Signature of Signing Officer or Director

Date