## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

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## DOCUMENT # P05000103292

1. Entity Name PRO TERRA CONSTRUCTION, INC.



Principal Place of Business

1309 SE 25TH LOOP SUITE 102

OCALA, FL 34471 US

Mailing Address

1309 SE 25TH LOOP SUITE 102 OCALA, FL 34471 US FILED Apr 17, 2007 8:00 am Secretary of State

04-17-2007 90049 006 \*\*\*150.00

40064795



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No Chg-P

CR2E034 (11/05)

4.	FEI Number						
	20-3194563						

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

DANIELS, BERRY DEE 2070 SE 32ND LANE OCALA, FL 34471

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				IN I	HIS SPACE
	named entity submits this statement for the pions of registered agent.	purpose of changing its registered off	ice or re	gistered agent, or bot	h, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	Il applicable, (NOTE Registered Agent	l signature	required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financing     Trust Fund Contribution.	0	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE	Ρ ,				
NAME	BROWN, JEFFREY L	IE 127th Place			
STREET ADDRESS	BROWN, JEFFREY L 2662 GW BONABLE DR. 1830 A DUNNELLON, FL 20491- A N.T. M.	F/ 334.5			
CITY-ST-ZIP		xy, 1 = 32617			
TITLE	\ VP				
NAME	DANIELS, JOHN P				
STREET ADDRESS	2070 SE 32ND LANE				
CITY-ST-ZIP	OCALA, FL 34471				
TITLE	s				
NAME	DANIELS, BERRY DEE				•
STREET ADDRESS	2070 SE 32ND LANE	1		no	NOT WRITE
CITY-ST-ZIP	OCALA, FL 34471			DO	NOI WALLE

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12. I hereby certify that the information supplied with this filling 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:

TITLE

NAME STREET ADDRESS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

CITY-ST-ZIP

DANIELS, BERRY DEE

2070 SE 32ND LANE

OCALA, FL 34471

MATTURE AND TYPED OR PRINTED NAME OF SIGNING OFFICEROR DIRECTOR DECEMBER DAVIELS 4/6/67 352-671-1107