

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 31, 2007 8:00 am
Secretary of State

08-31-2007 90002 037 ***150.00

DOCUMENT # P06000009193 1. Entity Name SOUTH ATLANTIC CONSTRUCTION INC.			
Principal Place of Business 2341 NE PARK STREET UNIT 6 JENSEN BEACH, FL 34957		Mailing Address 2341 NE PARK STREET UNIT 6 JENSEN BEACH, FL 34957	
2. Principal Place of Business - No P.O. Box # 4296 SE Covelake Circle		3. Mailing Address 4296 SE Covelake Circle	
Suite, Apt. #, etc. Apt. 202		Suite, Apt. #, etc. Apt. 202	
City & State Stuart, FL		City & State Stuart, FL	
Zip 34997		Zip 34997	
Country USA		Country USA	
6. Name and Address of Current Registered Agent HALL, ALAN L 2341 NE PARK STREET UNIT 6 JENSEN BEACH, FL 34957		7. Name and Address of New Registered Agent Name Alan L. Hall Street Address (P.O. Box Number is Not Acceptable) 4296 SE Covelake Circle Apt. 202 City Stuart FL Zip Code 34997	
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 Alan Hall 8-06-07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small> <small>DATE</small>			
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD HALL, ALAN L 2341 NE PARK STREET UNIT 6 JENSEN BEACH, FL 34957	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD MCCONNELL, KRISTOPHER L 2341 NE PARK STREET UNIT 6 JENSEN BEACH, FL 34957	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: Alan Hall		8-06-07 (772) 209-0717	