

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000025714

FILED  
Apr 06, 2009  
Secretary of State

**Entity Name:** INTERLACHEN CONSTRUCTION SERVICES, INC.

**Current Principal Place of Business:**

3538 NW 97TH BOULEVARD  
GAINESVILLE, FL 32606

**New Principal Place of Business:**

29 NW 123RD STREET  
NEWBERRY, FL 32669

**Current Mailing Address:**

P.O. BOX 357577  
GAINESVILLE, FL 32635

**New Mailing Address:**

**FEI Number:** 20-4346816

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

NELSON, CHARLES  
102 LYNNWOOD AVE  
INTERLACHEN, FL 32148 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: NELSON, CHARLES W  
Address: 3538 NW 97TH BOULEVARD  
City-St-Zip: GAINESVILLE, FL 32606

Title: D ( ) Delete  
Name: BURROUGHS, THOMAS  
Address: 3538 NW 97TH BOULEVARD  
City-St-Zip: GAINESVILLE, FL 32606

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: NELSON, CHARLES W  
Address: 29 NW 123RD STREET  
City-St-Zip: NEWBERRY, FL 32669

Title: D (X) Change ( ) Addition  
Name: BRENTON, JONATHAN  
Address: 29 NW 123RD STREET  
City-St-Zip: GAINESVILLE, FL 32606

I hereby certify that the information supplied with this filing does not qualify 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: CHARLES W. NELSON

PRES

04/06/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date