

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2007 8:00 am**  
**Secretary of State**

04-30-2007 90469 023 \*\*\*150.00

<b>DOCUMENT # P06000025741</b> 1. Entity Name <b>ARIN MCNULTY CONSTRUCTION, INC.</b>			
Principal Place of Business <b>12751 S.W. 76TH STREET CEDAR KEY, FL 32625</b>		Mailing Address <b>12751 S.W. 76TH STREET CEDAR KEY, FL 32625</b>	
2. Principal Place of Business - No P.O. Box # <b>12751 S.W. 76th St.</b>		3. Mailing Address <b>P.O. Box 40</b>	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State <b>Cedar Key, FL</b>		City & State <b>Cedar Key, FL</b>	
Zip <b>32625</b>		Zip <b>32625</b>	
Country 		Country 	
4. FEI Number <b>204365392</b>		<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>BUTTS, ROBERT P ESQ. FISHER, BUTTS, SECHREST &amp; WARNER, P.A. 5203 S.W. 91ST TERRACE, SUITE D GAINESVILLE, FL 32608</b>		7. Name and Address of New Registered Agent Name <b>BUTTS, ROBERT P ESQ.</b> Street Address (P.O. Box Number is Not Acceptable) <b>Fisher, Butts, Sechrest + Warner P.A.</b> <b>5203 S.W. 91st Terr. Suite D</b> City <b>Gainesville</b> <b>FL</b> Zip Code <b>32608</b>	
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 <u><i>Arin McNulty</i></u> <span style="float: right;">4-25-07</span> <small>Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when retreating) DATE</small>			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP MCNULTY, ARIN 12751 S.W. 76TH STREET CEDAR KEY, FL 32625	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS MCNULTY, SCOTT 12751 S.W. 76TH STREET CEDAR KEY, FL 32625	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	<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: <u><i>Arin McNulty</i></u>		4-25-07 352-215-1757 <small>Date Daytime Phone #</small>	