## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000088006

Entity Name: C&R CONSTRUCTION SVS., INC.

FILED May 18, 2010 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3512 LAKEWOOD DR 1028 DR MARTIN LUTHER KING JR MEMORIAL RD TALLAHASSEE, FL 32305 US

CRAWFORDVILLE, FL 32327

**Current Mailing Address: New Mailing Address:** 

3512 LAKEWOOD DR 1028 DR MARTIN LUTHER KING JR MEMORIAL RD

TALLAHASSEE, FL 32305 US CRAWFORDVILLE, FL 32327 US

FEI Number: 20-5046426 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

COLES, REGINALD COLES, REGINALD

3512 LÁKEWOOD DR 1028 DR MARTIN LUTHER KING JR MEMORIAL RD

TALLAHASSEE, FL 32305 US CRAWFORDVILLE, FL 32327 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: 05/18/2010

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

Name: MELTON, JOEY

1028 DR MARTIN LUTHER KING JR MEMORIAL RD Address:

City-St-Zip: CRAWFORDVILLE, FL 32327

Title: VΡ

Name: ROBINSON, ALICIA

1028 DR MARTIN LUTHER KING JR MEMORIAL RD Address:

CRAWFORDVILLE, FL 32327 City-St-Zip:

Title: S/T

MELTON, HIEDI Name:

1028 DR MARTIN LUTHER KING JR MEMORIAL RD Address:

City-St-Zip: CRAWFORDVILLE, FL 32327

Title:

ARATA COLES Name:

1028 DR MARTIN LUTHER KING JR MEMORIAL RD Address:

City-St-Zip: CRAWFORDVILLE, FL 32327

Title:

Name: TYLOR MELTON

1028 DR MARTIN LUTHER KING JR MEMORIAL RD Address:

City-St-Zip: CRAWFORDVILLE, FL 32327

Title:

Name: REGINALD COLES II

1028 DR MARTIN LUTHER KING JR MEMORIAL RD Address:

City-St-Zip: CRAWFORDVILLE, FL 32327

I hereby 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 all other like empowered.

SIGNATURE: REGINALD COLES **VP** 05/18/2010