## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000124078

Entity Name: SOUTHEAST TILT WALL ERECTORS INC

FILED May 14, 2008 Secretary of State

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

3681 SANDLOR DR. 3140 E OSCEOLA RD DELTONA, FL 32738 US GENEVA, FL 32732 US

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

3681 SANDLOR DR. 3140 E OSCEOLA RD DELTONA, FL 32738 US GENEVA, FL 32732 US

FEI Number: 26-1421401 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BODIFORD, BOBBY BODIFORD, BOBBY 3140 E OSĆEOLA RD 1235 ELM STREET OVIEDO, FL 32765 US GENEVA, FL 32732 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: BOBBY BODIFORD 05/14/2008

> 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: (X) Change ( ) Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete BODIFORD, BOBBY BODIFORD, BOBBY Name: Name: 3681 SANDLOR DR. Address: 3140 E OSCEOLA RD Address: City-St-Zip: DELTONA, FL 32738 US City-St-Zip: GENEVA, FL 32732 US

Title: Title: (X) Change ( ) Addition () Delete

BODIFORD, CAROL BODIFORD, CAROL Name: Name: 3681 SANDLOR DR. Address: 3140 E OSCEOLA RD Address: DELTONA, FL 32738 US GENEVA, FL 32732 US City-St-Zip: City-St-Zip:

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: CAROL BODIFORD 05/14/2008 TREA