

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000100715

FILED  
Feb 12, 2009  
Secretary of State

Entity Name: ADVANCED RESTORATION CONSTRUCTION, INC.

## Current Principal Place of Business:

1922 SW BILTMORE ST.  
PORT ST. LUCIE, FL 34984

## New Principal Place of Business:

3322 SE RIVER VISTA DRIVE  
PORT ST. LUCIE, FL 34952

## Current Mailing Address:

1922 SW BILTMORE ST.  
PORT ST. LUCIE, FL 34984

## New Mailing Address:

378 SE PORT ST. LUCIE BLVD  
1060  
PORT ST. LUCIE, FL 34984

FEI Number: 26-3709889

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCQUILLAN, PATRICK  
106 S. MANOR AVE.  
STUART, FL 34994 US

## Name and Address of New Registered Agent:

MCQUILLAN, PATRICK  
378 SE PORT ST. LUCIE BLVD  
1060  
PORT ST. LUCIE, FL 34984 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:

02/12/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete  
Name: MCQUILLAN, PATRICK  
Address: 106 S. MANOR AVE.  
City-St-Zip: STUART, FL 34994

Title: VP/D ( ) Delete  
Name: DUNLAP, DEAN  
Address: 3682 SW STERRICKER ST.  
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: T/D ( ) Delete  
Name: MCQUILLAN, WILLIAM  
Address: 3322 SE RIVER VISTA DR.  
City-St-Zip: PORT ST. LUCIE, FL 34952

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change ( ) Addition  
Name: MCQUILLAN, PATRICK  
Address: 100 N. SEWALLS POINT RD  
City-St-Zip: STUART, FL 34996

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: WILLIAM MCQUILLAN

TREA

02/12/2009

Electronic Signature of Signing Officer or Director

Date