

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 24, 2006 08:00 AM
Secretary of State

DOCUMENT # P08401

1. Entity Name
**MCDONALD CONSTRUCTION COMPANY, INC. OF
GEORGIA**



Principal Place of Business

**402 MAIN ST. N.E.
P.O. BOX 568
VIDALIA, GA 30474**

Mailing Address

**402 MAIN ST. N.E.
P.O. BOX 568
VIDALIA, GA 30474**



02162006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
58-1495239

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HAZEN, CHARLES S
146 COMMERCIAL AVE
EAST PALATKA, FL 32131**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MCDONALD, LINDY
STREET ADDRESS	4262 GA HWY 15
CITY-ST-ZIP	VIDALIA, GA 30474
TITLE	ST
NAME	DURRENCE, GWEN
STREET ADDRESS	461 ADAMS HAMMOCK RD.
CITY-ST-ZIP	VIDALIA, GA 30474
TITLE	V
NAME	WILLIAMSON, EDWARD
STREET ADDRESS	4092 OLD NORMATOWN RD.
CITY-ST-ZIP	VIDALIA, GA 30474
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1100000446379
03/08/06-80012-003 150.00

**DO NOT WRITE
IN THIS SPACE**

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Lindy McDonald

Lindy McDonald- President

Date

2-16-06

(912)537-41

Daytime Phone #