2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000003873

Name:

Address:

City-St-Zip:

SHEENE, RONALD W

PUNTA GORDA, FL 33955

11433 10TH AVE.

Entity Name: SHEENE CONSTRUCTION, INC.

FILED Mar 25, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
1321 LAVI PUNTA G	LLA RD ORDA, FL 33	950 US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
P.O. BOX PUNTA G	511685 ORDA, FL 33	9511685 US			
FEI Number	: 65-0388900	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of	Current Registered Agent	: Name and Address of	Name and Address of New Registered Agent:	
The above	e of Florida.		he purpose of changing its registered	office or registered agent, or both,	
Electronic Signature of Registered Agent			Agent	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DPT (SHEENE, BEN 1321 LAVILLA PUNTA GORD	RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DVS (SHEENE, MEL 1321 LAVILLA PUNTA GORD	RD	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title [.]	VP () Delete	Title [.]	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MELISSA G. SHEENE DVS 03/25/2009