## 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

## **FILED** DOCUMENT # P93000014340 Mar 21, 2007 08:00 AM Secretary of State PEYTON CONSTRUCTION COMPANY INC Principal Place of Business Mailing Address 10750 SE 166TH LANE SUMMERFIELD FL 34491 10750 SE 166TH LANE SUMMERFIELD FL 34491 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suito, Apt. #, etc. Suite Ant. #. etc 1st MOORE CR2E034 (10/06) Applied For City & Stato 4. FEI Number City & State 59-3167904 Not Applicable Country \$8.75 Additional Zip Country Zìp 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name PEYTON, CHARLES E Street Address (P.O. Box Number is Not Acceptable) 10750 SE 166TH LANE SUMMERFIELD FL 34491 Zip Code City 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 : aguired when reinstaling) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ■ Addition THUE Delete BILL PEYTON, CHARLES E NAME NAME 10750 SE 166TH LANE STREET ADDRESS STREET ADDRESS SUMMERFIELD FL 34491 CITY-ST-7IP CITY - ST- ZIP ☐ Change Addition ☐ Delete 11111 NAMI STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST- ZIP Ti Change Addition me THE L Delete NAME NAME STREET ADDRESS STREET ADDRESS CHY-SI-ZIP CITY-ST-ZIP Change Addition THE ☐ Defete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - S1 - 7(P Change Addition Delete THE NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP Change Addition TIFLE HILLS. Delete NAME NAMI STREET ADDRESS STREET ADDRESS CITY - S1 - ZIP CITY - ST-7IP 12. I hereby certify that the information supplied with this filing does not qualify for the examptions contained in Section 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 eath, that I am an efficiency 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 11 if changed, or on an attachment with an address, with all other like empowered.