

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000057229

FILED
Jan 26, 2009
Secretary of State

Entity Name: D. SHEFFIELD CONSTRUCTION, INC.

Current Principal Place of Business:

231 COMBS MANOR CT NW
FT. WALTON BEACH, FL 32548

New Principal Place of Business:

210 BAY STREET NW
APT. #4
FT. WALTON BEACH, FL 32548

Current Mailing Address:

P.O. BOX 1114
DESTIN, FL 32540

New Mailing Address:

P.O. BOX 1114
DESTIN, FL 32540 OK

FEI Number: 59-3197401

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHEFFIELD, DONALD R
231 COMBS MANOR CT., NW
FT. WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

SHEFFIELD, DONALD R
4426 STONEBRIDGE RD
DESTIN, FL 32541 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:

01/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHEFFIELD, DONALD R
Address: 231 COMBS MANOR CT. NW
City-St-Zip: FT. WALTON BCH., FL 32548

Title: ST () Delete
Name: SHEFFIELD, LINDA
Address: 231 COMBS MANOR CT. NW
City-St-Zip: FT. WALTON BCH., FL 32548

Title: V () Delete
Name: SHEFFIELD, LINDA
Address: 231 COMBS MANOR CT., DW
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: CEO () Delete
Name: SHEFFIELD, DONNTE T
Address: 231 COMBS MANOR CT., NW
City-St-Zip: FT. WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHEFFIELD, DONALD R
Address: 4426 STONEBRIDGE RD
City-St-Zip: DESTIN, FL 32541

Title: ST (X) Change () Addition
Name: SHEFFIELD, LINDA
Address: 4426 STONEBRIDGE RD
City-St-Zip: DESTIN, FL 32541

Title: V (X) Change () Addition
Name: SHEFFIELD, LINDA
Address: 4426 STONEBRIDGE RD
City-St-Zip: DESTIN, FL 32541

Title: CEO (X) Change () Addition
Name: SHEFFIELD, DONNTE T
Address: 4426 STONEBRIDGE RD
City-St-Zip: DESTIN, FL 32541

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: LINDA SHEFFIELD

VP

01/26/2009

Electronic Signature of Signing Officer or Director

Date