


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2008 08:00 AM
Secretary of State

DOCUMENT # P94000052909 1. Entity Name ALLEN DAMRON CONSTRUCTION COMPANY	
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Principal Place of Business 7903 DARLINGTON CIRCLE LAKELAND, FL 33809	Mailing Address 7903 DARLINGTON CIRCLE LAKELAND, FL 33809
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DO NOT WRITE IN THIS SPACE



04232008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3254799	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PUTNAM, ABEL
 500 SOUTH FLORIDA AVE.
 300
 LAKELAND, FL 33801

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

U00000948785
 06/03/08-80001-005 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAMRON, DEBRA L 7903 DARLINGTON CIRCLE LAKELAND, FL 33809
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT DAMRON, ALLEN 7903 DARLINGTON CIRCLE LAKELAND, FL 33809
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS DAMRON, DEBRA L 7903 DARLINGTON CIRCLE LAKELAND, FL 33809
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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

SIGNATURE:  _____ Date: 4/30/08 Daytime Phone #: 863-853-9720

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR