

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000050316

FILED  
Feb 12, 2009  
Secretary of State

Entity Name: CONSTRUCTION SERVICES OF GAINESVILLE, INC.

## Current Principal Place of Business:

2711 NW 6TH ST  
SUITE A  
GAINESVILLE, FL 32609

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 2902  
SUITE A  
GAINESVILLE, FL 32602 US

## New Mailing Address:

FEI Number: 59-3329413      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NIXON, C. DAVID  
102 RIVERSIDE DRIVE  
SATSUMA, FL 32189 US

## Name and Address of New Registered Agent:

NIXON, C. DAVID VPST  
102 RIVERSIDE DRIVE  
SATSUMA, FL 32189 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: C. DAVID NIXON

02/12/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LANDIS, WILLIAM C. III  
Address: 5821 NW 83RD TERR  
City-St-Zip: GAINESVILLE, FL 32606

Title: VPST ( ) Delete  
Name: NIXON, DAVID C.  
Address: 102 RIVERSIDE DR  
City-St-Zip: SATSUMA, FL 32189

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LANDIS, III, WILLIAM C  
Address: 5821 NW 83RD TERR  
City-St-Zip: GAINESVILLE, FL 32606

Title: VPST (X) Change ( ) Addition  
Name: NIXON, C. DAVID  
Address: 102 RIVERSIDE DR  
City-St-Zip: SATSUMA, FL 32189

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: C. DAVID NIXON

VPST

02/12/2009

Electronic Signature of Signing Officer or Director

Date