

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000052307

FILED
Mar 24, 2009
Secretary of State

Entity Name: CONSTRUCTION SOLUTIONS INC.

Current Principal Place of Business:

12865 GREENMEADOW PLACE
JACKSONVILLE, FL 32246

New Principal Place of Business:

Current Mailing Address:

13245 ATLANTIC BLVD
PMB 201
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 59-3333568 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HINSHAW, TK
102 32ND AVE S
JACKSONVILLE BEACH, FL 32250 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MCCARTHY, WILLIAM T
Address: 12865 GREENMEADOW PLACE
City-St-Zip: JACKSONVILLE, FL 32246

Title: D () Delete
Name: NEWKIRK, BRETT D
Address: 1906 ELAINA DRIVE
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: NEWKIRK, BRETT D
Address: 6223 CHERRY LAKE DRIVE NORTH
City-St-Zip: JACKSONVILLE, FL 32258

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: WILLIAM T. MCCARTHY

PRES

03/24/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date