

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 12, 2007 8:00 am
Secretary of State

05-29-2007 90042 035 ***150.00

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1. Entity Name
THE CONSTRUCTION JOURNAL, INC.



Principal Place of Business

**759 S FEDERAL HWY
STE #300
STUART, FL 34994 US**

Mailing Address

**759 S FEDERAL HWY
STE #300
STUART, FL 34994 US**

66018835



04142007 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0673699

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**GOLDMAN, RICHARD J
759 S FEDERAL HWY
STE #300
STUART, FL 34994**

**DO NOT WRITE
IN THIS SPACE**

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]
Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

4/18/07

**FILE NOW!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**PTD
GOLDMAN, RICHARD J
759 S FEDERAL HWY, #300
STUART, FL**

TITLE
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STREET ADDRESS
CITY- ST- ZIP

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CITY- ST- ZIP

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IN THIS SPACE**

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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/18/07