

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000098133

FILED  
Jan 15, 2007  
Secretary of State

Entity Name: ROBERT M. CARON CONSTRUCTION, INC.

**Current Principal Place of Business:**

8500 INDRIIO RD.  
FORT PIERCE, FL 34951

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 6671  
VERO BEACH, FL 329616771

**New Mailing Address:**

FEI Number: 59-3410635

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CARON, ROBERT M  
8500 INDRIIO RD.  
FORT PIERCE, FL 34951 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: P ( ) Delete  
Name: CARON, ROBERT M  
Address: 8500 INDRIIO RD.  
City-St-Zip: FORT PIERCE, FL 34951

Title: VP ( ) Delete  
Name: CARON, SUSAN  
Address: 8500 INDRIIO RD.  
City-St-Zip: FORT PIERCE, FL 34951

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT M. CARON

PRES

01/15/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date