


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 28, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P97000006174</b> 1. Entity Name NDC CONSTRUCTION COMPANY	
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Principal Place of Business 1001 3RD AVENUE WEST SUITE 600 BRADENTON, FL 34205	Mailing Address 1001 3RD AVENUE WEST SUITE 600 BRADENTON, FL 34205
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04202005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3423927	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  WALTERS, CLIFFORD 802 11TH STREET WEST BRADENTON, FL 34205
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**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when restate) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 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	PS ALLEN, RONALD J 1001 3RD AVE W, SUITE 410 BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TAS CONNOR, DIANE G 4415 5TH AVE PITTSBURG, PA 15213
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP VANDERGRIFT, LEE 1001 3RD AVE W, SUITE 410 BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MASON, MARTIN 4415 FIFTH AVENUE PITTSBURGH, PA 15213
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP HUGGINS, GARY L 1001 3RD AVENUE W STE 410 BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

1000001340850  
04/28/05-80134-014 158.75

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:** Martin Mason 4/20/05 412 578-7861  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #