## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000033517

Entity Name: HALLMARK PAVING INC.

FILED Jan 28, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

379 E. NORTH SHORE DR. 379 E NORTH SHORE DR

N. FT. MYERS, FL 33917 NORTH FORT MYERS, FL 33917

Current Mailing Address: New Mailing Address:

379 E. NORTH SHORE DR. 379 E NORTH SHORE DR

N. FT. MYERS, FL 33917 NORTH FORT MYERS, FL 33917

FEI Number: 65-0764885 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HALL, MARY ANN HALL, MARY ANN

379 E. NORTH SHORE DR. 379 E NORTH SHORE DR

N. FT. MYERS, FL 33917 US NORTH FORT MYERS, FL 33917 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: MARY ANN HALL 01/28/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP ( ) Delete Title: DP (X) Change ( ) Addition

Name: HALL, JOHN R Name: HALL, JOHN R

 Address:
 379 E. NORTH SHORE DR.
 Address:
 379 E. NORTH SHORE DR

 City-St-Zip:
 N. FT. MYERS, FL 33917
 City-St-Zip:
 NORTH FORT MYERS, FL 33917

Title: DVTS ( ) Delete Title: DVTS (X) Change ( ) Addition

 Name:
 HALL, MARY ANN
 Name:
 HALL, MARY ANN

 Address:
 379 E. NORTH SHORE DR.
 Address:
 379 E. NORTH SHORE DR

 City-St-Zip:
 N. FT. MYERS, FL 33917
 City-St-Zip:
 NORTH FORT MYERS, FL 33917

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: MARY ANN HALL DVTS 01/28/2008