

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 08:00 AM
Secretary of State

DOCUMENT # P97000086935

1. Entity Name

R.W. PAUL CONSTRUCTION, INC.



Principal Place of Business

581 E. HORATIO AVENUE
MAITLAND, FL 32751 US

Mailing Address

581 E. HORATIO AVENUE
MAITLAND, FL 32751 US



01232007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3474770

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PAUL, RALPH W
581 EAST HORATIO AVENUE
MAITLAND, FL 32751

**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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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 DP
NAME PAUL, RALPH W
STREET ADDRESS 581 E. HORATIO AVENUE
CITY-ST-ZIP MAITLAND, FL 32751

TITLE ST
NAME DAPORE, DAVID P
STREET ADDRESS 581 E. HORATIO AVENUE
CITY-ST-ZIP MAITLAND, FL 32751

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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1000000620750
02/09/07-80049-023 150.00

**DO NOT WRITE
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David Dapore

01.23.07

Date

407 599 5858

Daytime Phone #