

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000014693

FILED  
Mar 16, 2009  
Secretary of State

Entity Name: EASTERN SHORES CONSTRUCTION, INC.

## Current Principal Place of Business:

1015 ATLANTIC BLVD., STE. 240  
ATLANTIC BEACH, FL 32233

## New Principal Place of Business:

1015 ATLANTIC BOULEVARD  
SUITE 240  
ATLANTIC BEACH, FL 32233

## Current Mailing Address:

920 THIRD STREET  
SUITE D  
NEPTUNE BEACH, FL 32266

## New Mailing Address:

1015 ATLANTIC BOULEVARD  
SUITE 240  
ATLANTIC BEACH, FL 32233

FEI Number: 59-3532037

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEINENWEBER, ROBERT R  
1015 ATLANTIC BLVD., STE. 240  
ATLANTIC BEACH, FL 32233 US

## Name and Address of New Registered Agent:

LEINENWEBER, ROBERT  
1015 ATLANTIC BOULEVARD  
SUITE 240  
ATLANTIC BEACH, FL 32233 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: ROBERT LEINENWEBER

03/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: LEINENWEBER, ROBERT R  
Address: 1015 ATLANTIC BLVD., STE. 240  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: VPD ( ) Delete  
Name: LEINENWEBER, LARA  
Address: 1015 ATLANTIC BLVD., STE. 240  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: S ( ) Delete  
Name: LEINENWEBER, LARA  
Address: 1015 ATLANTIC BLVD., STE. 240  
City-St-Zip: ATLANTIC BEACH, FL 32233

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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 LEINENWEBER

DP

03/16/2009

Electronic Signature of Signing Officer or Director

Date