


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 18, 2006 8:00 am
Secretary of State

07-18-2006 90084 035 ***150.00

DOCUMENT # P98000088406	
1. Entity Name COMMERCIAL CONSTRUCTION CONSULTANTS, INC.	

Principal Place of Business 1115 SHORELINE LANE WINTERSET S.E. WINTER HAVEN, FL 33884	Mailing Address 335 MAGNOLIA AVE S.W WINTER HAVEN, FL 33884
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40099666



01092006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3537722	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

SMITH, ANNA M
1115 SHORELINE LANE
WINTERSET SE
WINTER HAVEN, FL 33884

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 reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD SMITH, ANNA M 1115 SHORELINE LN, WINTERSET SE WINTER HAVEN, FL 33884
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SMITH, THOMAS E 1115 SHORELINE LN, WINTERSET S.E. WINTER HAVEN, FL 33884
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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: Thomas E. Smith 13 July 2006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

40099666

Commercial Construction Consultants, Inc.
1115 Shoreline Lane
Winter Haven, Florida 33884

July 6, 2006

Department of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: Commercial Construction Consultants, Inc.
DOCUMENT #: P98000088406

Gentlemen:

Enclosed is a copy of your Notice of Intent to Dissolve postcard, our 2006 For Profit Corporation Annual Report, and check number 2060 in the amount of \$150.00 representing payment of the tax due with the filing of this return.

Due to illness and a change in address, we did not receive the Uniform Business Report from your office. We respectfully request that you abate any late filing fees since we did not receive any previous correspondence from your office.

Thank you for your assistance in this matter.

Sincerely,



Thomas E. Smith
Vice President

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