## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000008547

Entity Name: A.H.T. CONSTRUCTION, INC.

FILED Apr 13, 2005 Secretary of State

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

14844 95TH LANE NORTH 2727 FONDURA RD

WEST PALM BEACH, FL 33412 PORT SAINT LUCIE, FL 34953

**Current Mailing Address: New Mailing Address:** 

14844 95TH LANE NORTH 2727 FONDURA RD

WEST PALM BEACH, FL 33412 PORT SAINT LUCIE, FL 34953

FEI Number: 65-0888050 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:

TROSSEN, ANTHONY J TROSSEN, ANTHONY J 14844 95TH LANE NORTH 2727 FONDURA RD

WEST PALM BEACH, FL 33412 PORT SAINT LUCIE, FL 34953 US 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: ANTHONY J TROSSEN 04/13/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

Title: (X) Change ( ) Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete TROSSEN, ANTHONY J TROSSEN, ANTHONY J Name: Name: 2727 FONDURA RD Address:

14844 95TH LANE NORTH Address: City-St-Zip: WEST PALM BEACH, FL 33412 City-St-Zip: PORT SAINT LUCIE, FL 34953

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

TROSSEN, HOLLY Name: Name: TROSSEN, HOLLY 14844 95TH LANE NORTH 2727 FONDURA RD Address: Address: WEST PALM BEACH, FL 33412 PORT SAINT LUCIE, FL 34953 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

VΡ SIGNATURE: HOLLY TROSSEN 04/13/2005