

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P99000012462

1. Entity Name
REICH CONSTRUCTION SERVICES, INC.



Principal Place of Business
7503 124TH AVE N
UNIT C
LARGO, FL 33773

Mailing Address
PO BOX 1047
LARGO, FL 33779-1047

2. Principal Place of Business - No. P.O. Box #
2279 Tall Pines Drive

3. Mailing Address

Suite, Apt. #, etc.
Unit B

Suite, Apt. #, etc.

City & State

Largo, FL

City & State

Zip

33771

Country
Pinellas

Zip

Country

6. Name and Address of Current Registered Agent

DOWD, JEFFREY A PA
609 W LUMSDEN RD
BRANDON, FL 33511

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

V
REICH, DONALD E
7503 124TH AVE N, UNIT C
LARGO, FL 33773

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PSTD
REICH, MARY-IRENE
7503 124TH AVE N, UNIT C
LARGO, FL 33773

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

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: *Mary-Irene Reich*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Mary - Irene Reich
President**

1/14/07 *727-531-1378*
Date Daytime Phone #

**FILED
Jan 22, 2008 8:00 am
Secretary of State**

01-22-2008 90072 030 ***158.75



01142008 Chg-P CR2E034 (12/06)