

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000038473

FILED
Apr 23, 2009
Secretary of State

Entity Name: FALLMAN DESIGN AND CONSTRUCTION, INC.

Current Principal Place of Business:

242 E. HIGHLAND AVENUE
CLERMONT, FL 34711

New Principal Place of Business:

244 E. HIGHLAND AVENUE
CLERMONT, FL 34711

Current Mailing Address:

10618 LAKE HILL DRIVE
CLERMONT, FL 34711

New Mailing Address:

P.O. BOX 121746
CLERMONT, FL 34712

FEI Number: 59-3572437

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FALLMAN, CHRISTOPHER P
10618 LAKE HILL DRIVE
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

FALLMAN, CHRISTOPHER P
244 E. HIGHLAND AVENUE
CLERMONT, FL 34711 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:

04/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PV () Delete
Name: FALLMAN, CHRISTOPHER P
Address: 10618 LAKE HILL DRIVE
City-St-Zip: CLERMONT, FL 34711

Title: D () Delete
Name: FALLMAN, CHRISTOPHER P
Address: 10618 LAKE HILL DRIVE
City-St-Zip: CLERMONT, FL 34711

Title: ST () Delete
Name: FALLMAN, DEBRA J
Address: 10618 LAKE HILL DRIVE
City-St-Zip: CLERMONT, FL 34711 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PV (X) Change () Addition
Name: FALLMAN, CHRISTOPHER P
Address: 244 E. HIGHLAND AVENUE
City-St-Zip: CLERMONT, FL 34711

Title: D (X) Change () Addition
Name: FALLMAN, CHRISTOPHER P
Address: 244 E. HIGHLAND AVENUE
City-St-Zip: CLERMONT, FL 34711

Title: ST (X) Change () Addition
Name: FALLMAN, DEBRA J
Address: 244 E. HIGHLAND AVENUE
City-St-Zip: CLERMONT, FL 34711 US

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: DEBRA FALLMAN

ST

04/23/2009

Electronic Signature of Signing Officer or Director

Date