


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2008 08:00 A
Secretary of State

DOCUMENT # P99000064169
 1. Entity Name
 VARIAN CONSTRUCTION COMPANY, INC.



Principal Place of Business Mailing Address
 880 23RD ST SW 880 23RD ST SW
 NAPLES, FL 34117-4316 NAPLES, FL 34117-4316

DO NOT WRITE IN THIS SPACE



01082008 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
 59-3592635 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 VARIAN, WILLIAM S
 880 23RD ST SW
 NAPLES, FL 34117

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, 2008 Fee will be \$550.00

9. Election Campaign Financing \$5.00 May Be
 Trust Fund Contribution. Added to Fees

000000872126
 04/10/08-80025-022 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VARIAN, WILLIAM J 210 31ST STREET, N.W. NAPLES, FL 34120
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD VARIAN, MARIE E 880 23RDST SW NAPLES, FL 341174316
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD VARIAN, WILLIAM S 880 23RD ST SW NAPLES, FL 341174316
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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: *Marie E. Varian, Secretary* **MARIE E. VARIAN** 3/26/08
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #