

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000078758

FILED
Jan 25, 2006
Secretary of State

Entity Name: JOHN ODOM, GENERAL CONTRACTOR, INC.

Current Principal Place of Business:

17449 CAFERRO
PORT CHARLOTTE, FL 33948

New Principal Place of Business:

4344 LAURA ST
PORT CHARLOTTE, FL 33980

Current Mailing Address:

17449 CAFERRO
PORT CHARLOTTE, FL 33948

New Mailing Address:

4344 LAURA ST
PORT CHARLOTTE, FL 33980

FEI Number: 65-0946603

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ODOM, JOHN
17449 CAFERRO AVE
PORT CHARLOTTE, FL 33948 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ODOM, JOHN
Address: 17449 CAFERRO AVE
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: ODOM, JANIS
Address: 17449 CAFERRO AVE
City-St-Zip: PORT CHARLOTTE, FL 33948

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN ODOM

PD

01/25/2006

Electronic Signature of Signing Officer or Director

Date