

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S35279

FILED
Feb 27, 2008
Secretary of State

Entity Name: FRAME RIGHT CONSTRUCTION, INC.

Current Principal Place of Business:

955-K PALM VALLEY RD.
PONTE VEDRA BEACH, FL 32081

New Principal Place of Business:

Current Mailing Address:

955-K PALM VALLEY RD.
PONTE VEDRA BEACH, FL 32081

New Mailing Address:

6535 COUNTY ROAD 315 C
KEYSTONE HEIGHTS, FL 32656

FEI Number: 59-3057531

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CANTLON, CHRISTOPHER T.
955-K PALM VALLEY RD
PONTE VEDRA, FL 32081 US

Name and Address of New Registered Agent:

HAMMOND, TAMMY T
6535 COUNTY ROAD 315 C
KEYSTONE HEIGHTS, FL 32656 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: TAMMY T HAMMOND

02/27/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: CANTLON, CHRISTOPHER T.
Address: 955-K PALM VALLEY RD.
City-St-Zip: PONTE VEDRA, FL 32081

Title: DVS () Delete
Name: CANTLON, CHRISTOPHER, T.
Address: 955-K PALM VALLEY RD.
City-St-Zip: PONTE VEDRA, FL 32081

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: HAMMOND, TAMMY T
Address: 6535 COUNTY ROAD 315 C
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: DVS (X) Change () Addition
Name: HAMMOND, TAMMY T,
Address: 6535 COUNTY ROAD 315 C
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

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: TAMMY T HAMMOND

DPT

02/27/2008

Electronic Signature of Signing Officer or Director

Date