

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S40354

FILED
Apr 20, 2007
Secretary of State

Entity Name: GILLETTE CONSTRUCTION SERVICE CORP.

Current Principal Place of Business:

8895 NORTH MILITARY TRAIL
SUITE 300 C
PALM BEACH GARDENS, FL 33410 US

New Principal Place of Business:

Current Mailing Address:

8895 NORTH MILITARY TRAIL
SUITE 300 C
PALM BEACH GARDENS, FL 33410 US

New Mailing Address:

FEI Number: 65-0252884

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COX, JACK S ESQ.
9002 SE BRIDGE ROAD
HOBE SOUND, FL 33455 US

Name and Address of New Registered Agent:

COX, JACK S ESQ.
11450 SE DIXIE HIGHWAY
SUITE 104
HOBE SOUND, FL 33455 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:

04/20/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GILLETTE, NOR RENE
Address: 8895 NORTH MILITARY TRAIL 300 C
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VP () Delete
Name: DOMANDO, SANDRA
Address: 8895 NORTH MILITARY TRAIL 300 C
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D () Delete
Name: GILLETTE, MICHAEL
Address: 8895 NORTH MILITARY TRAIL 300 C
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VP () Delete
Name: JACQUOT, DENNIS
Address: 8895 NORTH MILITARY TRAIL 300 C
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: MICHAEL GILLETTE

D

04/20/2007

Electronic Signature of Signing Officer or Director

Date