


2008-FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2008 8:00 am
Secretary of State

03-10-2008 90077 002 ***150.00

DOCUMENT # S47165	
1. Entity Name MCCORD CONSTRUCTION, INC.	

Principal Place of Business 6510 BUTLERS CREST BRADENTON, FL 34203 US 2305 53rd Ave W Brad FL 34207	Mailing Address 6510 BUTLERS CREST BRADENTON, FL 34203 US 2305 53rd Ave W Brad FL 34207
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2. Principal Place of Business - No P.O. Box # 2305 53rd Ave W Brad FL 34207	3. Mailing Address 2305 53rd Ave W Brad FL 34207
Suite, Apt. #, etc. 2305 53rd Ave W	Suite, Apt. #, etc. 2305 53rd Ave W
City & State Brad FL	City & State Brad FL
Zip 34207	Country Manatee

40042343



02152008 Chg-P CR2E034 (12/06)

4. FEI Number 65-0254840	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MCCORD, DAVID M 6510 BUTLERS CREST BRADENTON, FL 34203	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____
Signature, typed or printed name of registered agent and title if applicable. (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 Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																								
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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: *David M. McCord* **2-28-08** **941 756 3630**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #