


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2007 08:00 AM
Secretary of State

DOCUMENT # V60765	
1. Entity Name PRICE CONSTRUCTION, INC.	

Principal Place of Business 7440 DAETWYLER DRIVE ORLANDO, FL 32812	Mailing Address P O BOX 590062 ORLANDO, FL 32859 US
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01052007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3140695	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent PRICE, KIM 7440 DAETWYLER DR. ORLANDO, FL 32812

**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

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, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST- ZIP	P PRICE, KIM 7440 DAETWYLER DR. ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST- ZIP	VP PRICE, PHILLIP 7440 DAETWYLER DR. ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST- ZIP	S PRICE, PHILIP 7440 DAETWYLER DR. ORLANDO, FL 32812
TITLE NAME STREET ADDRESS CITY-ST- ZIP	
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TITLE NAME STREET ADDRESS CITY-ST- ZIP	

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01/12/07-80006-011 158.75

**DO NOT WRITE
IN THIS SPACE**

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:

Kim Price *Kim Price* *President* *1-5-07 407.857-7416*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #