

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G61399

**FILED**  
**Jan 15, 2020**  
**Secretary of State**  
**1922877418CC**

**Entity Name:** PAUL SIMS CONSTRUCTION, INC.

**Current Principal Place of Business:**

% PAUL V. SIMS  
1419 W. 27TH ST.  
PANAMA CITY, FL 32405

**Current Mailing Address:**

% PAUL V. SIMS  
1419 W. 27TH ST.  
PANAMA CITY, FL 32405 US

**FEI Number:** 59-2362067

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

SIMS, PAUL V.  
% PAUL V. SIMS  
1419 W. 27TH ST.  
PANAMA CITY, FL 32405 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D  
Name SIMS, PAUL V  
Address % PAUL V. SIMS  
1419 W. 27TH ST.  
City-State-Zip: PANAMA CITY FL 32405

Title P  
Name SIMS, PAUL V  
Address % PAUL V. SIMS  
1419 W. 27TH ST.  
City-State-Zip: PANAMA CITY FL 32405

Title VP  
Name SIMS, PAUL V  
Address % PAUL V. SIMS  
1419 W. 27TH ST.  
City-State-Zip: PANAMA CITY FL 32405

Title SP  
Name SIMS, PAUL V  
Address % PAUL V. SIMS  
1419 W. 27TH ST.  
City-State-Zip: PANAMA CITY FL 32405

Title T  
Name SIMS, PAUL V  
Address % PAUL V. SIMS  
1419 W. 27TH ST.  
City-State-Zip: PANAMA CITY FL 32405

Title VP  
Name SIMS, STEPHEN  
Address 1419 W. 27TH ST.  
City-State-Zip: PANAMA CITY FL 32405

*I hereby 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 all other like empowered.*

**SIGNATURE:** PAUL V SIMS

**PRES**

**01/15/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date