

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H06935

**Entity Name:** MORALES CONSTRUCTION CO., INC.

**Current Principal Place of Business:**

6950 PHILIPS HWY  
SUITE 15  
JACKSONVILLE, FL 32216

**Current Mailing Address:**

6950 PHILIPS HWY  
SUITE 15  
JACKSONVILLE, FL 32216

**FEI Number:** 59-2418328

**Certificate of Status Desired:** No

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

RAX CO.  
50 N LAURA STREET  
SUITE 3300  
JACKSONVILLE, FL 32202 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 CD  
Name MORALES, R., JR.  
Address 6950 PHILIPS HWY STE 15  
City-State-Zip: JACKSONVILLE FL 32216

Title VPD  
Name KING, THOMAS FIII  
Address 6950 PHILIPS HWY STE 15  
City-State-Zip: JACKSONVILLE FL 32216

Title PD  
Name MORALES, RICARDO III  
Address 6950 PHILIPS HWY STE 15  
City-State-Zip: JACKSONVILLE FL 32216

Title SD  
Name HOWARD, MARCIA M.  
Address 6950 PHILIPS HWY STE 15  
City-State-Zip: JACKSONVILLE FL 32216

Title AS  
Name MANTON, JANE D  
Address 6950 PHILIPS HWY STE 15  
City-State-Zip: JACKSONVILLE FL 32216

*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:** RICARDO MORALES, III

**PRESIDENT**

**04/01/2015**

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

\_\_\_\_\_  
Date