

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000000179

Entity Name: GERARDI CONSTRUCTION, INC.**Current Principal Place of Business:**1604 N.19TH STREET
TAMPA, FL 33605**Current Mailing Address:**1604 N.19TH STREET
TAMPA, FL 33605 US**FEI Number:** 59-3715603**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JONES, GREGORY D PA
302 KNIGHTS RUN AVE
1000
TAMPA, FL 33602 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:** GREGORY D JONES

02/02/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

| | |
|-----------------|--------------------|
| Title | P |
| Name | GERARDI, PHILLIP |
| Address | 1604 N 19TH STREET |
| City-State-Zip: | TAMPA FL 33605 |

| | |
|-----------------|--------------------|
| Title | DIRECTOR |
| Name | GERARDI, CONNOR |
| Address | 1604 N 19TH STREET |
| City-State-Zip: | TAMPA FL 33605 |

| | |
|-----------------|----------------|
| Title | DIRECTOR |
| Name | GERARDI, REID |
| Address | 1604 N 19TH ST |
| City-State-Zip: | TAMPA FL 33605 |

| | |
|-----------------|--------------------|
| Title | DIRECTOR |
| Name | GERARDI, GRANT |
| Address | 1604 N.19TH STREET |
| City-State-Zip: | TAMPA FL 33605 |

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: PHILLIP GERARDI**PRESIDENT**

02/02/2024

Electronic Signature of Signing Officer/Director Detail

Date