

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J32288

**Entity Name:** C.A. BOONE CONSTRUCTION, INC.

**Current Principal Place of Business:**

400 SW SISTERS WELCOME RD.  
LAKE CITY, FL 32025

**Current Mailing Address:**

P.O. BOX 3236  
LAKE CITY, FL 32056-3236

**FEI Number:** 59-2719736

**Certificate of Status Desired:** No

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

BOONE, JAMES F  
182 SW GROUSE PLACE  
LAKE CITY, FL 32025 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 PD  
Name BOONE, JAMES F  
Address 182 SW GROUSE PLACE  
City-State-Zip: LAKE CITY FL 32025

Title S  
Name FONT, SHERRY  
Address 182 SW GROUSE PLACE  
City-State-Zip: LAKE CITY FL 32025

Title AS  
Name WRIGHT, RACHEL E  
Address P.O. BOX 3236  
City-State-Zip: LAKE CITY FL 32056

*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:** SHERRY FONT

**SECRETARY**

**02/18/2014**

Electronic Signature of Signing Officer/Director Detail

Date