

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

4/15/

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-15-2004 90005 018 ***150.00

DOCUMENT # 182992

1. Entity Name

J.C. BYRD INVESTMENT & CONTRACTING CO.



Principal Place of Business

CONTRACTING CO., 1203 GREENVIEW DRIVE
LAKELAND FL 33805

Mailing Address

CONTRACTING CO., 1203 GREENVIEW DRIVE
LAKELAND FL 33805

00410300



MOORE CR2E034 (11/03)

2. Principal Place of Business

514 Brooker Rd.

Suite, Apt. #, etc.

Brandon, Florida

City & State

Brandon, Florida

Zip

33511 Hillsborough

3. Mailing Address

514 Brooker Rd.

Suite, Apt. #, etc.

Brandon, Florida

City & State

Brandon, Florida

Zip

33511 Hillsborough

4. FEI Number

59-1325216

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BYRD, LILLIAN
1203 GREENVIEW DRIVE
LAKELAND FL 33805

7. Name and Address of New Registered Agent

Name Virginia Byrd

Street Address (P.O. Box Number is Not Acceptable)

514 Brooker Rd.

City Brandon

FL

Zip Code 33511

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

Virginia Byrd, P.D.

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, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE SD ☐ Delete

NAME BYRD, LILLIAN C
STREET ADDRESS 1203 GREENVIEW DR.
CITY-ST-ZIP LAKELAND FL

TITLE VP ☐ Delete

NAME BYRD, WILLIAM C.
STREET ADDRESS 207 WINDSOR DRIVE
CITY-ST-ZIP WARNER ROBINS GA

TITLE P. ☐ Delete

NAME BYRD-VIRGINIA
STREET ADDRESS 514 BROOKER RD
CITY-ST-ZIP BRANDON FL 33511

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Virginia Byrd

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 24, 2004 8136891421

Date

Daytime Phone