

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90269 026 ***150.00

DOCUMENT # 294159
 1. Entity Name
THE GREATER CONSTRUCTION CORP.



Principal Place of Business: **1105 KENSINGTON PK DR ALTAMONTE SPGS, FL 32714**
 Mailing Address: **1105 KENSINGTON PK DR ALTAMONTE SPGS, FL 32714**

03182004 No Chg-P CR2E034 (10/03)



DO NOT WRITE IN THIS SPACE

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4. FEI Number **59-1107583** Applied For Not Applicable
 5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MANDELL, ROBERT A.
1105 KENSINGTON PARK DR
ALTAMONTE SPRINGS, FL 32714

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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 _____ (NOTE: Registered Agent signature required when reinsaling) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CE
NAME	MANDELL, LESTER N
STREET ADDRESS	1105 KENSINGTON PARK DR
CITY-ST-ZIP	ALTAMONTE SPRINGS, FL
TITLE	CCEO
NAME	MANDELL, ROBERT A.
STREET ADDRESS	1105 KENSINGTON PARK DR.
CITY-ST-ZIP	ALTAMONTE SPRINGS, FL
TITLE	VD
NAME	SNYDER, SIMON
STREET ADDRESS	1105 KENSINGTON PARK DR
CITY-ST-ZIP	ALTAMONTE SPRINGS, FL
TITLE	P
NAME	GREGG, CHARLES W
STREET ADDRESS	1105 KENSINGTON PK DR
CITY-ST-ZIP	ALTAMONT SPRINGS, FL
TITLE	VP
NAME	CONLEY, HAMPTON W
STREET ADDRESS	1105 KENSINGTON PK DR
CITY-ST-ZIP	ALTAMONT SPTINGS, FL
TITLE	CFO
NAME	GALLAGHER, STEPHEN M
STREET ADDRESS	1105 KENSINGTON PARK DR.
CITY-ST-ZIP	ALTAMONTE SPRINGS, FL

ENTERED MAR 26 2004

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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: _____ **4/22/04** **407-869-0300**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #