

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jul 12, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # F96000005353

1. Entity Name  
 FONTENN CONSTRUCTION COMPANY, INC.



Principal Place of Business  
 4509 HIXSON PIKE  
 HIXSON, TN 37343 US

Mailing Address  
 4509 HIXSON PIKE  
 HIXSON, TN 37343 US

**DO NOT WRITE IN THIS SPACE**



07022004 No Chg-P CR2E034 (10/03)

4. FEJ Number 62-1486533 Applied For Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION, FL 33324

**DO NOT WRITE IN THIS SPACE**

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

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**  
**Due by September 8, 2004**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	FLANIGAN, DONALD EDWARD
STREET ADDRESS	4509 HIXSON PIKE
CITY - ST - ZIP	HIXSON, TN 37343
TITLE	V
NAME	FLANIGAN, DONALD EVERADO
STREET ADDRESS	4509 HIXSON PIKE
CITY - ST - ZIP	HIXSON, TN 37343
TITLE	S
NAME	FLANIGAN, ALTA
STREET ADDRESS	4509 HIXSON PIKE
CITY - ST - ZIP	HIXSON, TN 37343
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Donald Everado Flanigan  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #