

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 08, 2004 8:00 am
Secretary of State

04-08-2004 90033 031 ***150.00

DOCUMENT # P24481

1. Entity Name

U.S. GENERAL CONSTRUCTION, INC.



Principal Place of Business

11245 OLD ROSWELL ROAD
ALPHARETTA GA 30004

Mailing Address

11245 OLD ROSWELL ROAD
ALPHARETTA GA 30004

J4081040



MOORE

CR2E034 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

58-1032448

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GT-CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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 PTD ☐ Delete
NAME PEDEN, RICHARD H.
STREET ADDRESS 4645 CANDACRAIG
CITY-ST-ZIP ALPHARETTA GA 30022

TITLE 2VD ☐ Delete
NAME PEDEN, JO K
STREET ADDRESS 4645 CANDACRAIG
CITY-ST-ZIP ALPHARETTA GA 30022

TITLE S ☐ Delete
NAME PHILLIPS, JEAN
STREET ADDRESS 8468 MAJORS ROAD
CITY-ST-ZIP CUMMING GA 30131

TITLE D ☐ Delete
NAME PERRY, RICHARD P.
STREET ADDRESS 1175 CANTON STREET
CITY-ST-ZIP ROSWELL GA 30075

TITLE 1VPD ☐ Delete
NAME PEDEN, RICHARD H JR
STREET ADDRESS 3865 FALLS LANDING DRIVE
CITY-ST-ZIP ALPHARETTA GA 30022

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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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:

Richard H Peden Jr VP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-6-04

770 442-3333