

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 06, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000067684 1. Entity Name BLUE SKY BUILDER'S, INC.	
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Principal Place of Business 6281 WESTPORT LANE NAPLES, FL 34116	Mailing Address 6281 WESTPORT LANE NAPLES, FL 34116
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05032004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3527874	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CORDERO, JOSEPH J 6281 WESTPORT LANE NAPLES, FL 34116

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS CORDERO, JOSEPH J 6281 WESTPORT LANE NAPLES, FL 34116
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CORDERO, ANN HART 6281 WESTPORT LANE NAPLES, FL 34116
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CORDERO, VINCENT F 6281 WESTPORT LANE NAPLES, FL 34116
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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05/06/04-80031-013 150.00

**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)(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: <u>Joe Cordero</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	<u>Joe Cordero</u> Date	<u>4-30-04</u> Date	<u>239 272 6461</u> Daytime Phone #
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