

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 14, 2004 8:00 am**  
**Secretary of State**

04-26-2004 90577 007 \*\*\*150.00

**DOCUMENT # V13705**

1. Entity Name  
**CARPER & ANDREWS, INC.**



Principal Place of Business  
**31830 N. WASHINGTON LP. RD.  
PUNTA GORDA, FL 33982**

Mailing Address  
**8847 OTTER TRAIL S.W.  
ARCADIA, FL 34266**

**66421566**



02152004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>65-0309213</b>	Applied For Not Applicable
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5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**HALL, THOMAS P  
3443D TAMiami TRAIL  
PORT CHARLOTTE, FL 33952**

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**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 NAME STREET ADDRESS CITY-ST-ZIP	D CARPER, GEORGE R III 8847 SW OTTER TRAIL ARCADIA, FL 34266
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANDREWS, THOMAS P 31830 N. WASHINGTON LP. RD. PUNTA GORDA, FL 33982
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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: *George R. Carper III* Date: 5/9/04 Daytime Phone #: 863 491-0038  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR