

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V68170

FILED
Jan 28, 2004
Secretary of State

Entity Name: COALSON CONTRACTORS, INC.

Current Principal Place of Business:

524 FIST ST N
JACKSONVILLE BCH, FL 32250 US

New Principal Place of Business:

524 FIRST ST N
JACKSONVILLE BCH, FL 32250 US

Current Mailing Address:

524 FIRST ST N
JAX BCH, FL 32250 US

New Mailing Address:

FEI Number: 59-3161407 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COALSON, PETER B
1614 COQUINA PL
ATLANTIC BCH, FL 32233

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: COALSON, PETER,
Address: 1614 COQUINA PL
City-St-Zip: ATLANTIC BCH, FL 32233

Title: DVP () Delete
Name: BORNHAUSER, THOMAS A
Address: 7698 HOLLYRIDGE CIRCLE
City-St-Zip: JAXX, FL 32256

Title: T (X) Delete
Name: GODWIN, CHARLES
Address: 4995 PINE CONE COURT
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER B. COALSON

DP

01/28/2004

Electronic Signature of Signing Officer or Director

Date