


**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 04, 2004 8:00 am**  
**Secretary of State**

02-04-2004 90043 036 \*\*\*\*61.25

**DOCUMENT # 711591**

1. Entity Name  
 IRON WORKERS LOCAL NO. 397 BUILDING COMPANY, INC.



Principal Place of Business 10201 HWY 92 E TAMPA, FL 33610 US	Mailing Address PO BOX 18 MANGO, FL 33550 US
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**DO NOT WRITE IN THIS SPACE**



01232004 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-0481747	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

DEES, EDWARD D.  
 1901 SPARKMAN RD.  
 PLANT CITY, FL 33566

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25**  
**Due by May 1, 2004**

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	PD BROWN, GRADY L. 6845 FOREST WOOD W LAKELAND, FL 33811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DEES, EDWARD D. 1901 SPARKMAN RD PLANT CITY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD NUNN, THOMAS 7107 W PIERCE HARWELL RD PLANT CITY, FL 33565
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**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 617, 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:** Edward D. Dees **1/30/04** **813-623-1515**

SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #