


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 13, 2004 08:00 AM
Secretary of State

DOCUMENT # 853719
 1. Entity Name
BATES ENGINEERS/CONTRACTORS, INC.



Principal Place of Business Mailing Address
 210 AIRPORT RD. P.O. BOX 846
 P.O. BOX 856 BAINBRIDGE GA 39818
 BAINBRIDGE GA 39817

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt # etc.

City & State City & State

Zip Country Zip Country



MOORE CR2E034 (11/03)

4. FEI Number **58-0872699** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
CT 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 _____ (NOTE: Registered Agent signature required when reconstituting) DATE _____
 Signature, typed or printed name of registered agent and title if applicable

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 PD Delete
 NAME LEE, STEVEN M.
 STREET ADDRESS LAKE DOUGLAS RD.
 CITY-ST-ZIP BAINBRIDGE GA.

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
 Change Addition
 000000050018
 02/13/04-80047-006 158.75

TITLE VD Delete
 NAME WEBB, EUGENE S.
 STREET ADDRESS DOGWOOD ACRES
 CITY-ST-ZIP BAINBRIDGE GA.

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE VD Delete
 NAME WIGGINS, MICHAEL L.
 STREET ADDRESS 1996 THOMAS DRIVE
 CITY-ST-ZIP BAINBRIDGE GA

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE VD Delete
 NAME BEERS, JOHN R
 STREET ADDRESS 2008 LAKEWOOD CT
 CITY-ST-ZIP BAINBRIDGE GA

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 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)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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, or as the authorized officer or trustee empowered.

SIGNATURE: Steven M. Lee, P.E., President **2/11/04** **229-246-4312**