2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2004 08:00 AM
Secretary of State

DOCUMENT # F98000001501

1. Entity Name
BEN M. RADCLIFF CONTRACTOR, INC.

Principal Place of Business	Mailing Address
3456 HALLS MILL ROAD MOBILE, AL 36693	P.O. BOX 8368 MOBILE, AL 36689-0368

DO NOT WRITE IN THIS SPACE

02032004 No Chg-P CR2E034 (10/03)

4. FEI Number
63-0419772
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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

U00000076932
03/05/04-80021-025 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	RADCLIFF JR, BEN M
STREET ADDRESS	3456 HALLS MILLL ROAD
CITY-ST-ZIP	MOBILE, AL
TITLE	VCD
NAME	RADCLIFF, BEN M
STREET ADDRESS	3456 HALLS MILLL ROAD
CITY-ST-ZIP	MOBILE, AL
TITLE	D
NAME	RADCLIFF, JEAN F
STREET ADDRESS	3456 HALLS MILLL ROAD
CITY-ST-ZIP	MOBILE, AL
TITLE	ST
NAME	COBB, GLENNIE J
STREET ADDRESS	3456 HALLS MILLL ROAD
CITY-ST-ZIP	MOBILE, AL
TITLE	VD
NAME	FRENKEL, PAUL A
STREET ADDRESS	3456 HALLS MILLL ROAD
CITY-ST-ZIP	MOBILE, AL 36693
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Glennie J Cobb 2/29/04 251 666 7252
GLENNIE J. COBB, SEC./TREA.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #