2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 237213

1. Entity Name
ESCAMBIA CONSTRUCTION CO., INC.

Principal Place of Business	Mailing Address
8900 U.S. 98, WEST P.O. BOX 3256 PENSACOLA, FL 32506 US	P. O. BOX 3256 PENSACOLA, FL 32516 US

DO NOT WRITE IN THIS SPACE

01152004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
59-0902465	Not Applicable

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

6. Name and Address of Current Registered Agent

BLANTON, MICHAEL A
8900 U.S. 98 WEST
PENSACOLA, FL 32506

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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 _____

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

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	U00000057452 02/19/04-80051-025 150.00

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	BLANTON,MICHAEL
STREET ADDRESS	8900 U.S. 98, WEST
CITY-ST-ZIP	PENSACOLA, FL
TITLE	SDV
NAME	BLANTON,JOLYNE R
STREET ADDRESS	8900 U.S. 98, WEST
CITY-ST-ZIP	PENSACOLA, FL
TITLE	AS
NAME	BLANTON, MARSHA S.
STREET ADDRESS	8900 U.S. 98, WEST
CITY-ST-ZIP	PENSACOLA, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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: _Marsha S. Blanton_   Marsha S.Blanton   2/9/04   850-456-6631

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