


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 15, 2004 08:00 AM
Secretary of State

DOCUMENT # 332899		
1. Entity Name R.R. SIMMONS CONSTRUCTION CORPORATION		
Principal Place of Business 14025 RIVEREDGE DR SUITE 550 TAMPA, FL 33637	Mailing Address 14025 RIVEREDGE DR SUITE 550 TAMPA, FL 33637	
DO NOT WRITE IN THIS SPACE		



02052004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1221161	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SIMMONS, R RANDOLPH III 14025 RIVEREDGE DR SUITE 550 TAMPA, FL 33637	DO NOT WRITE IN THIS SPACE
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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 _____ (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. <input type="checkbox"/>	\$5.00 May Be Added to Fees	U00000087734 03/15/04-80023-001 158.75
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD SIMMONS, R RANDOLPH III 927 N RIVERHILLS DRIVE TEMPLE TERRACE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ZEVALLOS, CESAR A 18027 KINGS PARK DRIVE TAMPA, FL 33647
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST SIMMONS, LINDA O. 927 N RIVERHILLS DRIVE TEMPLE TERRACE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WEBSTER, MALINDA 13015 ST FILAGREE DR RIVERVIEW, FL 33569
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LANGER, LINDA W 4141 BAYSHORE BLVD., #302 TAMPA, FL 33611
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 118.07(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: *Linda O. Simmons* **PRESIDENT** 8/10/04 813-632-5550
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
LINDA O. SIMMONS