


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 14, 2005 08:00 AM
Secretary of State

DOCUMENT # 393062		
1. Entity Name TAPLIN CONSTRUCTION CORPORATION		
Principal Place of Business 258 FAIRVIEW WEST PALM BEACH FL 33480 US		Mailing Address 258 FAIRVIEW WEST PALM BEACH FL 33480 US
Principal Place of Business	3 Mailing Address	
Suite Apt	Suite Apt #	
City	City	State
Country	Zip	



1st MOORE CR2E034 (10/04)

4. FEI Number 59-1372296	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent TAPLIN, LIBBY 258 FAIRVIEW RD WEST PALM BEACH FL 33480	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 reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE V	<input type="checkbox"/> Delete	TITLE U00000305602	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME TAPLIN, NORMAN E		NAME 04/14/05-80091-009 150.00	
STREET ADDRESS 2535 EMBASSY DRIVE		STREET ADDRESS	
CITY-ST-ZIP W PALM BEACH FL 33401		CITY-ST-ZIP	
TITLE TD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME TAPLIN, JAY A		NAME	
STREET ADDRESS 20967 VERONA WAY		STREET ADDRESS	
CITY-ST-ZIP BOCA RATON FL 33433		CITY-ST-ZIP	
TITLE SD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME TAPLIN, LIBBY G		NAME	
STREET ADDRESS 258 FAIRVIEW ROAD		STREET ADDRESS	
CITY-ST-ZIP PALM BEACH FL 33480		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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)(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: *Libby Taplin* **LIBBY TAPLIN 4-11-05-561-844-197**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #