2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2004 8:00 am
Secretary of State
01-20-2004 90045 013 ***150.00

DOCUMENT # 410949

1. Entity Name
REGISTER CONSTRUCTION & ENGINEERING, INC.

Principal Place of Business	Mailing Address
3730 NEW TAMPA HWY LAKELAND, FL 33815 US	3730 NEW TAMPA HWY LAKELAND, FL 33801

01132004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	3730 NEW TAMPA HWY Suite, Apt. #, etc.
City & State	LAKELAND, FL City & State
Zip / Country	33815 / US Zip / Country

4. FEI Number 59-1419729 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

REGISTER, LESTER D
3730 NEW TAMPA HIGHWAY
LAKELAND, FL 33815

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 _____ 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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P GARD, MARK J. 5925 SPRING LAKE DEVL LAKELAND, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P GARD MARK J. 5925 SPRING LAKE DRIVE LAKELAND, FL 33811	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST BUTLER, R. MICHAEL 5068 LAKE MIRIAM CIR LAKELAND, FL 00000,	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST BUTLER, R. MICHAEL 5068 LAKE MIRIAM CV LAKELAND, FL 33813	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C REGISTER, LESTER D. JR. 830 WEDGERWOOD LN LAKELAND, FL 00000,	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C REGISTER, LESTER D. JR. P.O. BOX 1278 BOCA GRANDE, FL 33921	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: _____ MIKE BUTLER 1-14-04 863 688 7775
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #