## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 449038**

FILED Apr 30, 2004 Secretary of State

| Entity Nan  | ne: DAL BUILDE  | RS, INC.                      |   |  | •                                      |  |
|---|---|-------------------------------|---|--|--|--|
| Current Principal Place of Business:  |   |                               | New Prince                                  | New Principal Place of Business:             |  |  |
| 1500 FULLI<br>TALLAHAS  | ER ROAD<br>SEE, FL 32303  | US                            |   |  |  |  |
| Current Mailing Address:  |   |                               | New Maili                                   | New Mailing Address:                         |  |  |
| P.O. BOX 1<br>TALLAHAS  | 80065<br>SEE, FL 32318  | US                            |   |  |  |  |
| FEI Number:   | 59-1531696 F  | El Number Applied For()       | FEI Number Not App                          | licable ( )                                  | Certificate of Status Desired ( )      |  |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: |   |                               |   |  |  |  |
| 1500 FULLI  | DALLAS A JR<br>ER ROAD<br>SEE, FL 30303                             | US                            |   |  |  |  |
| The above in the State  |   | mits this statement for the p | purpose of changing i                       | ts registere                                 | d office or registered agent, or both, |  |
| SIGNATUR  | !E:   |                               |   |  |  |  |
|   |   | Signature of Registered Ag    | ent   |  | Date                                   |  |
| Election Cam  | paign Financing Tru   | ust Fund Contribution ( ).    |   |  |  |  |
| OFFICERS AND DIRECTORS:   |   |                               | ADDITION                                    | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | PST () Del<br>LAMBERT, DALLAS<br>1500 FULLER ORA<br>TALLAHASSEE, FL | S A ,J, R<br>D                | Title:<br>Name:<br>Address:<br>City-St-Zip: |  | () Change () Addition                  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | VP () Del<br>LAMBERT, SHANEY<br>1500 PULLER RD<br>TALLAHASSEE, FL   | Y                             | Title:<br>Name:<br>Address:<br>City-St-Zip: | VP<br>LAMBERT,<br>1500 FULLI<br>TALLAHASS    |  |  |

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAMBERT, DALLAS A, JR PST 04/30/2004