


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 04, 2004 08:00 AM
Secretary of State

DOCUMENT # 462929 1. Entity Name SPAIN CONSTRUCTION COMPANY, INC.	
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Principal Place of Business 2321 NW 41 ST STE A2 GAINESVILLE, FL 32606	Mailing Address 2321 NW 41 ST STE A2 GAINESVILLE, FL 32606
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01262004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1555241	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

**DO NOT WRITE
IN THIS SPACE**

6. Name and Address of Current Registered Agent SPAIN, THOMAS C 6011 NW 23 AVE GAINESVILLE, FL 32606

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 _____
Signature, typed or printed name of registered agent and title if applicable.

**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	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P SPAIN, THOMAS 6011 NW 23 AVE GAINESVILLE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S SPAIN, SUSAN B. 6011 NW 23 AVE GAINESVILLE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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02/05/04-80037-013 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: X Susan B. Spain, Sec. **SUSAN B. SPAIN, SEC.** 2/4/04 352.376.4372
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #