


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 11, 2004 8:00 am
Secretary of State

02-11-2004 90008 006 ***150.00

DOCUMENT # 510020

1. Entity Name
TRI-SUN BUILDERS, INC.



Principal Place of Business Mailing Address
23295 WEATHERMAN AVE **P.O. BOX 380159**
PT CHARLOTTE FL 33952 **MURDOCK FL 33938**
US

2. Principal Place of Business 3. Mailing Address
512 WATERSIDE ST
 Suite, Apt. #, etc. Suite, Apt. #, etc.
PT. CHARLOTTE FL 33954
 City & State City & State



MOORE CR2E034 (11/03)

4. FEI Number **59-1714668** Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
POLK, JOHN L
141 W MARION AVE
PUNTA GORDA FL 33950

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, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	TS	<input type="checkbox"/> Delete
NAME	DIRMEYER, BILLIE J	
STREET ADDRESS	20169 MET PROSPECT BLVD	
CITY-ST-ZIP	PORT CHARLOTTE FL 33952	
TITLE	T	<input type="checkbox"/> Delete
NAME	DIRMEYER, BILLIE J	
STREET ADDRESS	20169 MT PROSPECT BLVD	
CITY-ST-ZIP	PT CHARLOTTE FL 33952	
TITLE	P	<input type="checkbox"/> Delete
NAME	DIRMEYER, LARRY J	
STREET ADDRESS	20169 MT PROSPECT BLVD	
CITY-ST-ZIP	PT CHARLOTTE FL 33952	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	512 WATERSIDE ST	
CITY-ST-ZIP	PT. CHARLOTTE FL 33954	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	512 WATERSIDE ST.	
CITY-ST-ZIP	PT. CHARLOTTE FL 33954	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	512 WATERSIDE ST	
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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: Larry J. Dirmeyer **LARRY J. DIRMEYER** 2/2/04 9416292000
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #