2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 12, 2004 8:00 am Secretary of State **DOCUMENT # 511042** 1. Entity Name 04-12-2004 90642 011 ***150.00 PETERSON CONSTRUCTION, INC. Principal Place of Business Mailing Address 2809 ROUND LAKE RD. ZELLWOOD FL 32798 P.O. BOX 1269 14000020 ZELLWOOD FL 32798 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) MOORE City & State City & State 4. FEI Number Applied For 59-1689239 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PETERSON, ROGER A. Street Address (P.O. Box Number is Not Acceptable) 2809 ROUND LAKE RD ZELLWOOD FL 32798 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PD TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME PETERSON, ROGER A. NAME STREET ADDRESS 2809 ROUND LAKE RD STREET ADDRESS CITY-ST-ZIP ZELLWOOD FL 32798 CITY-ST-78 TITLE ☐ Delete TITLE Change ☐ Addition PETERSON, ROGER A., JR. NAME NAME STREET ADDRESS 2815 ROUND LAKE RD STREET ADDRESS CITY-ST-ZIP ZELLWOOD FL 32798 CITY-ST-ZIP TITLE Delete. TITLE 🔽 Change ___ 🖸 Addition NAME PETERSON, ARLENE J NAME 2809 Round LAKE Kd STREET ADDRESS 2909 ROUND LAKE RD STREET ADDRESS CITY-ST-ZIP ZELLWOOD FL 32798 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Chance ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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

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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 of 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:

Reger A, Peterson 47 of 407-880-3612