## **FILED** 2004 FOR PROFIT CORPORATION ANNUAL REPORT Jan 12, 2004 8:00 am Secretary of State **DOCUMENT #643021** 01-12-2004 90013 005 \*\*\*150.00 Mailing Address 11741 LAKE SUSAN COURT

CLERMONT CONSTRUCTION COMPANY, INC. Principal Place of Business 11741 LAKE SUSAN COURT CLERMONT, FL 34711 CLERMONT, FL 34711 %20/,.-666666F& 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 01082004 Chg-P City & State City & State Applied For 4. FEI Number 59-1951447 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 WASHUTA, DAVID A. Street Address (P.O. Box Number is Not Acceptable) 11741 LAKE SUSAN COURT CLERMONT, FL 34711 City 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 egistered agent. SIGNATÜRE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be  $\Box$ Trust Fund Contribution Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITI F TIST F ☐ Change ☐ Addition ☐ Defete WASHUTA, DAVID A. NAME 11741 LAKE SUSAN COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CLERMONT, FL 34711 CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition WASHUTA, DAVID A., JR NAME NAME STREET ADDRESS 12549 ERYN BLVD STREET ADDRESS CITY-ST-ZIP CLERMONT, FL 34711 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Channe ☐ Addition WASHUTA, SHANNON M STREET ADDRESS 11741 LAKE SÜSAN COURT STREET ADDRESS CLERMONT, FL 34711 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition WASHUTA, AARON FRANK NAME NAME STREET ADDRESS 1118 CHELSEA PARC DR STREET ADDRESS CITY-ST-ZIP CLERMONT, FL 34711 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADORESS 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 ag

SIGNATURE:

Date