


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 03, 2004 08:00 AM
Secretary of State

DOCUMENT # 667929	
1. Entity Name VAN HOOSER ENGINEERING, PLANS AND SURVEYING, INC.	

Principal Place of Business 250 CHERRY AVE MERRITT ISLAND FL 32953	Mailing Address 250 CHERRY AVE MERRITT ISLAND FL 32953
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



MOORE CR2E034 (11/03)

4. FEI Number 59-1982479		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		

6. Name and Address of Current Registered Agent VANHOOSER, JR., JOHN C. 250 CHERRY AVENUE MERRITT ISLAND FL	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PD	NAME VANHOOSER, JR., JOHN C. <input type="checkbox"/> Delete	TITLE	NAME U07000075132 <input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 250 CHERRY AVENUE		STREET ADDRESS	03/03/04-80046-019 150.00
CITY - ST - ZIP MERRITT ISLAND FL 32953		CITY - ST - ZIP	
TITLE VD	NAME VANHOOSER, JOHN PATRICK <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 615 MIRIAM LANE		STREET ADDRESS	
CITY - ST - ZIP LUSBY MD 20657		CITY - ST - ZIP	
TITLE STD	NAME VANHOOSER, TERESA <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 250 CHERRY AVENUE		STREET ADDRESS	
CITY - ST - ZIP MERRITT ISLAND FL 32953		CITY - ST - ZIP	
TITLE VD	NAME MCILVAIN, WILLIAM <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 3008 UNITY TREE DRIVE		STREET ADDRESS	
CITY - ST - ZIP EDGEWATER FL 32141		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		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)(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:

John C. Van Hooser, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-29-04 321-452-1875
Date Daytime Phone #