## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Aug 26, 2004 8:00 am Secretary of State **DOCUMENT # 690866** 08-26-2004 90006 050 \*\*\*150.00 ARTHUR CONSTRUCTION AND PLASTERING, **INCORPORATED** Principal Place of Business Mailing Address 1100 14TH STREET **1100 14TH STREET** ~~ · V L U L ORANGE CITY, FL 32763 ORANGE CITY, FL 32763 2. Principal Place of Business 3. Mailing Address Cactus Lane 3594 3594 Cactus Suite, Apt. #, etc. 1+ Dora CR2E034 (10/03) 08222004 Chq-P Applied For 4. FEI Number 59-2268079 Not Applicable $\frac{1}{Country}US$ \$8.75 Additional 32757 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Arthur ARTHUR, RICHARD L. Street Address (P.O. Box Number is Not Acceptable) 1100 14TH STREET ORANGE CITY, FL 32763 Lane Cactus 3594 h the State of Florida. I am familiar with, and accept 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent. or the obligations of registered agent. Arthur pres (NOTE: Registered Agent signature re In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees Due by September 8, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. Arthur, Richard L Change Addition DP TITLE TITLE Delete ARTHUR, RICHARD L NAME NAME 3594 Cactus Lane Mt. Dora, FL 32757 **1100 14TH STREET** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **ORANGE CITY, FL** Change ☐ Addition D ☐ Delete TITLE TITLE Arthur, Karen G. 3594 Cactus Lane Mt. Dora, FL 32 ARTHUR, KAREN G. NAME NAME STREET ADDRESS STREET ADDRESS 1100 14TH STREET 32757 ORANGE CITY, FL CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ■ Addition TT Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS COY-ST-ZP 12. I hereby certify that the information of policy 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 to stee expowered to execute this report as equired 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 employees. SIGNATURE:

FILED