

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 18, 2004 8:00 am
Secretary of State

02-18-2004 90018 020 ***150.00

DOCUMENT # 696103

1. Entity Name

NORTON ENGINEERING CONTRACTORS, INC.



Principal Place of Business

521 SAN MATEO RD #22
PO BOX 220
SAN MATEO FL 32187
US

Mailing Address

PO BOX 220
SAN MATEO FL 32187
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2120597

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CUNNINGHAM, DELE E
521 SAN MATEO RD #22
SAN MATEO FL 32187

7. Name and Address of New Registered Agent

Name

Robert D. Cunningham

Street Address (P.O. Box Number is Not Acceptable)

521 San Mateo RD #22

City

San Mateo

FL

Zip Code

32187

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

R. D. Cunningham, Pres. 2/6/2004

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
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
CUNNINGHAM, JANET R
521 SAN MATEO RD #22
SAN MATEO FL 32187 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
CUNNINGHAM, ROBERT D
521 SAN MATEO RD #22
SAN MATEO FL 32187 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
CUNNINGHAM, DALE E
521 SAN MATEO RD #22
SAN MATEO FL 32187 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President / Director ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

R. D. Cunningham

2/6/2004

Date

Daytime Phone #

386-328-4866