2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Mar 12, 2004 8:00 am Secretary of State DOCUMENT # 711998 02-27-2004 90015 005 \*\*\*\*61.25 1. Entity Name SHEETMETAL LOCAL 130 BUILDING CORP., INC. Principal Place of Business Mailing Address 1003 BELVEDERE RD. 1003 BELVEDERE RD. 66405717 WEST PALM BEACH FL 33405 WEST PALM BEACH FL 33405 2. Principal Place of Business 3. Mailing Address. Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) City & State City & State 4. FEI Number Applied For 59-1737356 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HUDSPETH, ROGER L., SR. 1003 BELVEDERE RD. Street Address (P.O. Box Number, is Not Acceptable) --**WEST PALM BEACH FL 33405** 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 registered agent. Business Representative SIGNATURE Roger L. Hudsoeth 2-19-2004 Signature, typed or printed name of registered agent and title if applicable. FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to П Due By May 1; 2004 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. PSTD TITLE . Delete TITLE ☐ Change ☐ Addition HUDSPETH, ROGER L NAME NAME 1003 BELVEDERE RD. STREET ADDRESS STREET ADDRESS W PALM BCH FL 00000 CITY-ST-ZIP CITY - ST- ZIP TITLE ☐ Delete TITL F ☐ Change ☐ Addition BELCHER, JOHN W NAME 172 JAMICA DRIVE STREET ADDRESS STREET ADDRESS PALM SPRINGS FL 33461 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition HUDSPETH, ROGER L II NAME NAME CTAGE STREET, ADDRESS WEST PALM BEACH FL 33405 -CITY-SY-ZIP CITY-ST-ZIP ☐ Change TITLE Delete ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Defele TITLE 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)(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 617. 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:

FILED