


**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 23, 2004 08:00 AM
Secretary of State

DOCUMENT # 725496		
1. Entity Name THE NINE HUNDRED BUILDING INC		
Principal Place of Business 900 SIXTH AVENUE SOUTH SUITE NO. 203 NAPLES, FL 34102 US		Mailing Address 900 SIXTH AVENUE SOUTH SUITE 203 NAPLES, FL 34102 US
DO NOT WRITE IN THIS SPACE		
		04162004 No Chg-NP CR2E037 (10/03)
		4. FEI Number 59-1681630 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		
INGRAM, L.N., III 900 SIXTH AVE SOUTH STE 302 NAPLES, FL 34102		DO NOT WRITE IN THIS SPACE
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 _____		
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
		U000000127068 04/23/04-80060-007 61.25
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD INGRAM, L.M. III 900 6TH AVE SOUTH, STE 302 NAPLES, FL 34102	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD YEAGER, JOHN C 900 6TH AVE SOUTH, STE 102 NAPLES, FL 34102	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD WHITLEY, S. WARD 900 SIXTH AVENUE SOUTH NAPLES, FL 34102	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VASQUEZ, ERIC J 900 6TH AVE SOUTH, STE 201 NAPLES, FL 34102	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11, if changed, or on an attachment with an address. (289)		
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 4/21/04 Daytime Phone # 262-4121		