

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 12, 2004 8:00 am**  
**Secretary of State**

04-12-2004 90272 028 \*\*\*150.00

<b>DOCUMENT # 831995</b>	
1. Entity Name ROLAND PUGH CONSTRUCTION, INC.	

Principal Place of Business 1280 POWDER PLANT RD SW BESSEMER, AL 35022 US	Mailing Address 1280 POWDER PLANT RD SW BESSEMER, AL 35022 US
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**DO NOT WRITE IN THIS SPACE**



03302004 No Chg-P CR2E034 (10/03)

4. FEI Number 63-0500152	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

8. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
 1200 S. PINE ISLAND ROAD  
 PLANTATION, FL 33324

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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 \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST PUGH, ANTHONY 1280 POWDER PLANT RD SW BESSEMER, AL 35022
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C PUGH, ROLAND 1280 POWDER PLANT RD SW BESSEMER, AL 35022
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P YESSICK, JOSEPH EDDIE I 1280 POWDER PLANT RD SW BESSEMER, AL 35022
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO PUGH, GRADY 1280 POWDER PLANT RD SW BESSEMER, AL 35022
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO SAHAGUN, MELISSA 1280 POWDER PLANT RD SW BESSEMER, AL 35022
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V YOUNG, FRED 1280 POWDER PLANT RD SW BESSEMER, AL 35022

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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: Melissa Sahagun 4/11/04  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #