2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2004 08:00 AM
Secretary of State

DOCUMENT # 845149

1. Entity Name
W.G. YATES & SONS CONSTRUCTION COMPANY

Principal Place of Business	Mailing Address
P.O BOX 456 1 GULLY AVENUE PHILADELPHIA, MS 39350	P.O BOX 456 1 GULLY AVENUE PHILADELPHIA, MS 39350

DO NOT WRITE IN THIS SPACE

01072004 No Chg-P CR2E034 (10/03)

4. FEI Number 64-0429766 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	C/D
NAME	YATES, WILLIAM G JR
STREET ADDRESS	304 DOGWOOD
CITY-ST-ZIP	PHILADELPHIA, MS 39350
TITLE	ST/D
NAME	GOSS, ALINDA J
STREET ADDRESS	10560 ROAD 547
CITY-ST-ZIP	PHILADELPHIA, MS 39350
TITLE	P/D
NAME	YATES, WILLIAM G III
STREET ADDRESS	2034 TUILLERIS COVE
CITY-ST-ZIP	BILOXI, MS 39350
TITLE	V
NAME	DEARMAN, TED H
STREET ADDRESS	305 HESTER
CITY-ST-ZIP	CLINTON, MS 39056
TITLE	V
NAME	CHILDRESS, DONALD R
STREET ADDRESS	774 FAIRWAY TRAIL
CITY-ST-ZIP	HERNANDO, MS 38632
TITLE	V
NAME	JOHNSON, E M III
STREET ADDRESS	302 AZALEA DRIVE
CITY-ST-ZIP	PHILADELPHIA, MS 39350

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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: Alinda Goss 1/7/04 (601)656-5411
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #