

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2004 08:00 AM
Secretary of State

DOCUMENT # 857459

1. Entity Name
CADDELL CONSTRUCTION CO., INC.



Principal Place of Business
**2700 LAGOON PARK DRIVE
PO BOX 210099
MONTGOMERY, AL 36121**

Mailing Address
**2700 LAGOON PARK DRIVE
PO BOX 210099
MONTGOMERY, AL 36121**



02052004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
63-0837971

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

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

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**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
NAME
STREET ADDRESS
CITY-ST-ZIP
**CD
CADDELL, JOHN A.
2700 LAGOON PARK DRIVE
MONTGOMERY, AL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**STD
CADDELL, JOYCE K.
2700 LAGOON PARK DR
MONTGOMERY, AL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
MARTIN, M LAMAR
2700 LAGOON PARK DR
MONTGOMERY, AL 36109**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
CADDELL, JOHN K
2700 LAGOON PARK DRIVE
MONTGOMERY, AL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
STEWART, B.E.
2700 LAGOON PARK DRIVE
MONTGOMERY, AL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
BARROW, WARREN B
2700 LAGOON PARK DRIVE
MONTGOMERY, AL**

000000101371
04/02/04-80010-013 150.00

**DO NOT WRITE
IN THIS SPACE**

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:

M. Lamar Martin

M. LAMAR MARTIN, V.P. 3-17-04 334.272.7723

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #