2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F00000007240

1. Entity Name
SUNBELT BUILDERS, INC.

Principal Place of Business	Mailing Address
913 MONTGOMERY HIGHWAY	913 MONTGOMERY HIGHWAY
BIRMINGHAM, AL 35216	BIRMINGHAM, AL 35216

DO NOT WRITE IN THIS SPACE

02112004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
63-1067092	Not Applicable

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

6. Name and Address of Current Registered Agent

HANNA, CRAIG
DEAN STEEL
2929 INDUSTRIAL AVE.
FORT MYERS, FL 33901

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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

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when renewing)   DATE

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

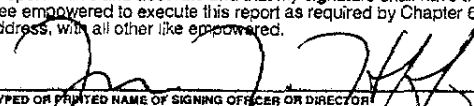9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000062181
02/23/04-80112-003 150.00

10.   OFFICERS AND DIRECTORS

TITLE	P
NAME	HOFF, JOHN T
STREET ADDRESS	913 MONTGOMERY HIGHWAY
CITY-ST ZIP	BIRMINGHAM, AL 35216

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
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TITLE	
NAME	
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CITY-ST ZIP	

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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: _____   2/20/04   (205) 822-2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #