2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 19, 2004 08:00 AM Secretary of State

ANNUAL REPORT				Apr 13, 2004 00.00			
	MENT # F0200000646			S	ecretary o	i Sta	
1. Entity Name GENTRY STEEL FABRICATION INCORPORATED							
Principal Place	e of Business M	lailing Address					
1313 HWY. 3		1313 HWY. 31 N.					
PRATTVILLE,	AL 30007	PRATTVILLE, AL 36067			il sava IIsti MBW 22011 SA	no mante mate mate più mate più dal III	::•:::::::::::::::::::::::::::::::::::
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DO NOT WRITE IN THIS SPA			CF	03312004	No Chg-P	CR2E034 (10/03)	a Sand Fran
			-	4. FEI Numb			plied For t Applicable
					e of Status Desired	□ \$8.75 Add	
	6. Name and Address of Current Regi	Lierad Acani				Fee Required	<u> </u>
<u> </u>		austed Agent	-,				
CORPORATE ACCESS, INC. 236 E. 6TH AVE.				DO	NOT W	'RITE	
TALLAHASSEE, FL 32303				IM '	THIS SE	PACE	
				## #	11110 01	AUL	
	named entity submits this statement for the ions of registered agent.	purpose of changing its registe	red office or registe	red agent, or be	oth, in the State of Fl	orida. I am familiar with,	and accept
the congar	intis ottaglistatan sõetii.						
SIGNATURE.	Signature, typed or printed name of registered agent and all	il applicable. (NOTE, Register	ed Agent signature require	d whon reinstating)	·	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	9. Election Campaign Fine Trust Fund Contribution	incing \$5	.00 May Be led to Fees	linn	0000119223	
10.	OFFICERS AND DIRE	CTORS			<u> </u>	<u>"04-80092-003</u>	158.75
TITLE	C						
NAME STREET ADDRESS	GENTRY, JOHN L SR 1439 UPPER KINGSTON RD.						
CITY-ST-ZIP	PRATTVILLE, AL 36067						
TITLE	vc						
NAME STREET ADDRESS	NANCE, ROBERT L 1405 CROWSPASS		1				
CITY-ST-ZIP	PRATTVILLE, AL 36067						
TITLE							
NAME STREET ADDRESS						'DITE	
CITY-ST-ZIP				DO	NOT W	/KIIE	
TITLE				IN	THIS SI	PACE	
NAME CTOSET ADDRESS				41.4			
STREET ADDRESS CITY-ST-ZIP							
TITLE			1				
NAME							
STREET ADDRESS 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 attaching it with an address, with all other like empowered.

SIGNATURE: _

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-31-04

334-365-8244

Daytime Phone #