2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2004 08:00 AM
Secretary of State

DOCUMENT # F95000003623

1. Entity Name
THE BETTER BUILT GROUP, INC.

Principal Place of Business	Mailing Address
212 E MAIN ST LEESBURG, FL 34748 US	212 E MAIN ST LEESBURG, FL 34748 US

01192004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3324028
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

PERRY, JAMES N
212 EAST MAIN STREET
LEESBURG, FL 34749-0007

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 _____ 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

000000017966
01/28/04-80119-001 150.00

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	PHILLIPS, RUPERT E
STREET ADDRESS	1738 GIANT SYCAMORE LANE
CITY-ST-ZIP	BAKER, FL 31531
TITLE	S
NAME	PHILLIPS, SANDRA K
STREET ADDRESS	1738 GIANT SYCAMORE LANE
CITY-ST-ZIP	BAKER, FL 32531
TITLE	DV
NAME	DAWS, HAROLD C
STREET ADDRESS	208 NORTHCLIFF DR.
CITY-ST-ZIP	GULF BREEZE, FL 32561
TITLE	V
NAME	PERRY, JAMES N
STREET ADDRESS	212 E MAIN ST
CITY-ST-ZIP	LEESBURG, FL 34749
TITLE	T
NAME	PAYNE, ALAN
STREET ADDRESS	212 E MAIN ST
CITY-ST-ZIP	LEESBURG, FL 34749
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: Alan S. Payne 1/21/04 352-365-8200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #