

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000006970

FILED
Jul 02, 2004
Secretary of State

Entity Name: AMBLING CONSTRUCTION COMPANY

Current Principal Place of Business:

348 ENTERPRISE DR
VALDOSTA, GA 31601

New Principal Place of Business:

Current Mailing Address:

P O BOX 5979
VALDOSTA, GA 316035979

New Mailing Address:

348 ENTERPRISE DRIVE
VALDOSTA, GA 31601

FEI Number: 58-2410528

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GODWIN, MICHAEL H
Address: 348 ENTERPRISE DR
City-St-Zip: VALDOSTA, GA 31601

Title: VS () Delete
Name: HOLMES, R. R
Address: 348 ENTERPRISE DR
City-St-Zip: VALDOSTA, GA 31601

Title: D () Delete
Name: HOLMES, RHETT
Address: 348 ENTERPRISE DR
City-St-Zip: VALDOSTA, GA 31601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL H GODWIN

P

07/02/2004

Electronic Signature of Signing Officer or Director

_____ Date