2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2005 8:00 am
Secretary of State
01-13-2005 90001 016 ***158.75

66001307

DOCUMENT # G01646

1. Entity Name
O'BRIEN CONSTRUCTION COMPANY

Principal Place of Business	Mailing Address
1224 U.S. HWY 1 # C NORTH PALM BEACH, FL 33408 US	1224 U.S. HWY 1 # C NORTH PALM BEACH, FL 33408 US

DO NOT WRITE IN THIS SPACE

01052005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2224550
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

O'BRIEN, BRIAN K
1224 U.S. HWY 1
SUITE C
NORTH PALM BEACH, FL 33408

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, 2005 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PST
NAME	O'BRIEN, BRIAN K.
STREET ADDRESS	16 YACHT CLUB PLACE
CITY-ST-ZIP	TEQUESTA, FL 33469
TITLE	VP
NAME	PRINCE, MICHAEL
STREET ADDRESS	72 IRONWOOD WAY N
CITY-ST-ZIP	WEST PALM BEACH, FL 33418
TITLE	S
NAME	GAINES, DALE
STREET ADDRESS	8661 SE DUNCAN
CITY-ST-ZIP	HOBE SOUND, FL 33455
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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: BRIAN K. O'BRIEN PRESIDENT 2/2/05 561-799-2326
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #