

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 09, 2004 8:00 am
Secretary of State

04-09-2004 90058 023 ***150.00

DOCUMENT # G37725 1. Entity Name HOWZE CONSTRUCTION, INC.			
Principal Place of Business 5414-26TH ST W BRADENTON FL 34207 US		Mailing Address 5414 26TH ST W BRADENTON FL 34207 US	
2. Principal Place of Business 5406 26th Street West Suite, Apt. #, etc.		3. Mailing Address 5406 26th Street West Suite, Apt. #, etc.	
City & State Bradenton, FL Zip 34207		City & State Bradenton, FL Zip 34207	
Country USA		Country USA	
4. FEI Number 59-2286898		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HOWZE, THOMAS A. 5414 26TH ST W BRADENTON FL 34207		7. Name and Address of New Registered Agent Name Howze, Thomas A. Street Address (P.O. Box Number is Not Acceptable) 5406 26th Street West City Bradenton FL Zip Code 34207	
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 <u>Thomas A. Howze</u> <u>Thomas A. Howze</u> <u>4/6/04</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HOWZE, THOMAS A 5414 26TH ST W BRADENTON, FL 00000	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Howze, Thomas A. 5406 26th Street West Bradenton, FL 34207
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
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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: <u>Thomas A. Howze</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		<u>4-6-04</u> <u>941-753-6710</u> Date Daytime Phone #	