

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H74463

FILED  
Apr 30, 2004  
Secretary of State

**Entity Name:** FIRST AMERICAN PROPERTIES SHEPHERD ROAD CORPORATION

**Current Principal Place of Business:**

1501 SHEPARD RD  
5  
LAKELAND, FL 33811 US

**Current Mailing Address:**

PO BOX 6271  
LAKELAND, FL 33807 US

**New Principal Place of Business:**

1501 SHEPHERD ROAD  
5  
LAKELAND, FL 33811 US

**New Mailing Address:**

1501 SHEPHERD ROAD  
5  
LAKELAND, FL 33811 US

**FEI Number:** 59-2727619

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HODGES, CARLTON D  
222 WOOD HALL DRIVE  
MULBERRY, FL 33860

**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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HODGES, CARLTON D.,  
Address: 222 WOODHALL DRIVE  
City-St-Zip: MULBERRY, FL

Title: TD ( ) Delete  
Name: WENDEL, JOHN F.,  
Address: 5300 SOUTH FLORIDA AVE.  
City-St-Zip: LAKELAND, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: HODGES, CARLTON D.,  
Address: 222 WOODHALL DRIVE  
City-St-Zip: MULBERRY, FL 33860

Title: TD (X) Change ( ) Addition  
Name: WENDEL, JOHN F.,  
Address: 5300 SOUTH FLORIDA AVE.  
City-St-Zip: LAKELAND, FL 33803

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: CARLTON D HODGES

PD

04/30/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date