## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Nancy A. Lowery

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFF

SIGNATURE: \_

## Feb 04, 2004 8:00 am **Secretary of State** DOCUMENT # H93650 1. Entity Name 02-04-2004 90037 016 \*\*\*158.75 DCC CONSTRUCTORS, INC. Principal Place of Business Mailing Address 355 SOUTH C.R. 427 LONGWOOD FL 32750 355 SOUTH C.R. 427 LONGWOOD FL 32750 2. Principal Place of Business 3. Mailing Address 1025 S. Semoran Blvd., 1025 S. Semoran Blvd... Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) <u>Suite 10</u>77 Suite 1077 Applied For City & State Winter Park, City & State 4. FEI Number FL. 59-2624448 Winter Park, FL Not Applicable Zip Country Country \$8.75 Additional X 5. Certificate of Status Desired Fee Required 32792 USA 32792 USA 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name LOWERY, NANCY A Street Address (P.O. Box Number is Not Acceptable) ~1025-S:-SEMORAN:BLVD:; STE-1077------WINTER PARK FL 32792 City Zin Code FL 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. Signature, typed or printed name of registered agent and title if applicable DATE FILE NOW!!! FEE IS \$150.00 Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Addition TITLE Delete TITLE р. X Change JONES, JOHN A. NAME NAME Jones, John A. STREET ADDRESS 355 SOUTH C.R. 427 STREET ADDRESS 1025 S. Semoran Blyd., Suite 1077 Winter Park, FL 32792 CITY-ST-ZIP LONGWOOD FL CITY-ST-ZIP VPT TITLE Delete TITLE Change ☐ Addition VARNON, JR., ROBERT L. NAME NAME 355 SOUTH C.R. 427 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LONGWOOD FL CITY-ST-ZIP ☐ Delete TITLE X Change ☐ Addition TITI F Lowery, Nancy-A. -----NAME LOWERY, NANCY A ... . NAME. -1025 S. Semoran Blvd., Suite 1077 STREET ADDRESS STREET ADDRESS 355 SOUTH C.R. 427 CITY-ST-ZIP CITY-ST-ZIP Winter Park, FL 32792 LONGWOOD FL Director ☐ Change X Addition TITLE Delete TITLE Lundeen, Kenneth C. NAME NAME STREET ADDRESS STREET ADDRESS 1025 S. Semoran Blvd., Suite 1077 CITY-ST-7IP CITY-ST-ZIP Winter Park, FL 32792 ☐ Change ☐ Delete TITLE TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 equired 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

FILED

1/28/04

Date

407/679-3344

Daytime Phone #