


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 16, 2004 08:00 AM
Secretary of State

DOCUMENT # J00481 1. Entity Name ZIMMER CONSTRUCTION CO., INC.	
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Principal Place of Business 330 S. FAULKENBURG RD TAMPA, FL 33619 US	Mailing Address 330 S. FAULKENBURG RD TAMPA, FL 33619 US
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DO NOT WRITE IN THIS SPACE



03312004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2635561	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**HARMAN, CHARLES CPA
303 WARNELL STREET
PLANT CITY, FL 33566**

**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: N. GREG ZIMMER (NOTE: Registered Agent signature required when reinstating) DATE: 4-13-04

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000116499 04/16/04-80068-003 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ZIMMER, GREG 11320 MC MULLEN LOOP RIVERVIEW, FL 33569
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST ZIMMER, SHARON 11320 MC MULLEN LOOP RIVERVIEW, FL 33569
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: N. GREG ZIMMER DATE: 4-13-04 DAYTIME PHONE: 813 6432711

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR