## **2004 FOR PROFIT CORPORATION ANNUAL REPORT**

## **DOCUMENT # J08315**

FEKANY BUILDERS, INC.

**FILED** May 05, 2004 08:00 AM Secretary of State

Principal Place of Business

MAITLAND, FL 32751

2120 DYAN WAY MAITLAND, FL 32751 Mailing Address % MARK FEKANY 2120 DYAN WAY MAITLAND, FL 32751



						20022004
$\neg$	NOT	A A A LONG TOTAL PROPERTY OF THE PARTY OF TH	-	THE		
IJIJ	NULL	VVIKLLE	IIV	1115	SPACE	
_		***	*	* * * * * *	O. 7.0-	4. FEI Number

05022004	No Chg-P	CR2E034 (10	V03)
4. FEI Number			Applied For
59-2666	972		Not Applicable

\$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent FEKANY, MARK 2120 DYAN WAY

## 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 Signature, typed or printed name of registered agent and the it applicable (NOTE Registered Agent signature required when reinstating)  DATE									
	LE NOW!!! FEE IS \$50.000 us by September 2, 200 fc	Election Campaign Financ     Trust Fund Contribution.	cing 🗆	\$5.00 May Be Added to Fees					
10.	OFFICERS AND DIREC	CTORS							
name Street address City-St-Zip	DC FEKANY, MARK 2120 DYAN WAY MAITLAND, FL								
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000155892 05/05/04-80055-015 150.00				
TITLE AAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE				
title Name Street address City-St-Zip				IN '	THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					· · · · · · · · · · · · · · · · · · ·				
TITLE NAME STREET ADDRESS 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 logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee employered 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: