

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90373 028 ***150.00

DOCUMENT # J12186

1. Entity Name
SLATER & SONS GENERAL CONTRACTORS, INC.



Principal Place of Business Mailing Address
2212 NORTH WEST 14TH WAY 2212 NORTH WEST 14TH WAY
BOYNTON BEACH, FL 33436 US BOYNTON BEACH, FL 33436 US

14004723



2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

04122004 Chg-P CR2E034 (10/03)

City & State City & State

4. FEI Number Applied For
59-2697791 Not Applicable

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent

SLATER, RICHARD A.
121 SANTIAGO STREET
ROYAL PLM BCH., FL 33411

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
DS	SLATER, MERRIE A.		
121 SANTIAGO STREET	ROYAL PALM BEACH, FL		
DP	SLATER, RICHARD A. SR.		
121 SANTIAGO STREET	ROYAL PALM BEACH, FL		
DVP	SLATER, RICHARD A. JR.		
22864 OVERSEAS HIGHWAY	CUDJOE KEY, FL		
DT	SLATER, ROBERT C.		
2212 NORTH WEST 14TH WAY	BOYNTON BEACH, FL		

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: *Merrie A. Slater* Date: *4/14/04* Daytime Phone #: *561-793-9342*