## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# J12186

FILED Jan 10, 2005 Secretary of State

Entity Name: SLATER & SONS GENERAL CONTRACTORS, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2212 NORTH WEST 14TH WAY BOYNTON BEACH, FL 33436 **Current Mailing Address: New Mailing Address:** 2212 NORTH WEST 14TH WAY BOYNTON BEACH, FL 33436 US FEI Number: 59-2697791 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SLATER, RICHARD A 121 SANTIAGO STREET ROYAL PLM BCH., FL 33411 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition SLATER, MERRIE A., Name: Name: 121 SANTIAGO STREET Address: Address: City-St-Zip: ROYAL PALM BEACH, FL City-St-Zip: Title: DΡ Title: () Delete () Change () Addition Name: SLATER, RICHARD A. SR. Name: 121 SANTIAGO STREET Address: Address: ROYAL PALM BEACH, FL City-St-Zip: City-St-Zip: ( ) Delete Title: Title: DVP () Change () Addition SLATER, RICHARD A. JR. Name: Name: 22864 OVERSEAS HIGHWAY Address: Address: City-St-Zip: CUDJOE KEY, FL City-St-Zip: Title: DT ( ) Delete Title: () Change () Addition SLATER, ROBERT C. Name: Name: Address: 2212 NORTH WEST 14TH WAY Address: City-St-Zip: BOYNTON BEACH, FL City-St-Zip:

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: MERRIE A. SLATER DS 01/10/2005