## **FILED** Apr 26, 2004 8:00 am Secretary of State

2004	ruk rki	UFII 1	LUKP	UKAIIU	N
	ANNU	JAL R	EPOR	T	

DOCUMENT # J17799  1. Entity Name NELSON'S CONSTRUCTION COMPANY				04-26-2004	4 91286 026 *	**150.00		
Principal Plac 5947 TRAIL MILTON, FL	LANE	Mailing Address 5947 TRAIL LANE MILTON, FL 32583						
DO NOT WRITE IN THIS SPACE			CE	04212004 No Chg-P CR2E034 (1				
			<b>/</b>	4. FEI Number 59-276	5802	\$8.75	Applied For Not Applicable Additional	
	8 Name and Saltrees of Comment De	ale to part A are ut		5. Certificate	of Status Desired	Fee Re		
8. Name and Address of Current Registered Agent NELSON, CARL E 5947 TRAIL LANE MILTON, FL 32583			DO NOT WRITE IN THIS SPACE					
the obligat	named entity submits this statement for thions of registered agent.	e purpose of changing its register	ed office or registe	red agent, or bo	th, in the State of Flo	rida. 1 am familiar	with, and accept	
SIGNATURE_	gifuants' liber of bises up an otteffinanc affect auc	life i applicable. (NOTE Pegisters	с Адапі яідпаіцна перыі в	: when reinsteling)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	DATE		
FIL After Ma	E NOWII! FEE IS \$150.09 ay 1, 2004 Fee will be \$550.09	Election Campaign Final Trust Fund Contribution.		.00 May Be led to Fees				
TO. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECTORS  P NELSON, CARL E 5 6947 TRAIL LAINE MILTON, FL 32583			.·*				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,						,	
TITLE HAME STREET AUUNESS CHY-ST-ZIP	- N - 1 - N - 1 - 1 - 1 - 1 - 1 - 1 - 1	* * = * -	and the second	DO.	NOT W	RITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ss			IN <sup>-</sup>	THIS SP	ACE		
TITLE NAME STREET ADURESS GTY-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 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.

E. MELSON 2-22-0H.
TYPED ON PRINTED MAIR OF BROWNING OFFICER OR GRECTOR FILE NELSON 2 2-22-0H.
DON'T PRINTED MAIR OF BROWNING OFFICER OR GRECTOR