

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

Jul 01, 2004 08:00 AM
Secretary of State

DOCUMENT # J59723

1. Entity Name
WILLIAM COOPER CONSTRUCTION SERVICES, INC.



Principal Place of Business
**2889 LA CONCHA DR
CLEARWATER, FL 33762-2201 US**

Mailing Address
**2889 LA CONCHA DR
CLEARWATER, FL 33762-2201 US**



05102004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2804533

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**COOPER, WILLIAM T JR
2889 LA CONCHA DR
CLEARWATER, FL 33762-2201**

**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 (if applicable)

(NOTE: Registered Agent signature required when resigning)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PC
COOPER, WILLIAM T JR
2889 LA CONCHA DR
CLEARWATER, FL 337622201**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VTD
COOPER, ADELINA C
2889 LA CONCHA DR
CLEARWATER, FL 337622201**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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07/01/04-80003-015 150.00

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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)(c), 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 of Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

William T. Cooper, Jr.

WILLIAM T. COOPER, JR

6/26/04

(727) 592-9351

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #