


2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 23, 2004 08:00 AM
Secretary of State

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| DOCUMENT # J77566 1. Entity Name TOTAL CONSTRUCTORS, INC. |  |
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| Principal Place of Business 103 COMMERCE STR STE 100 LAKE MARY, FL 32746 US | Mailing Address 103 COMMERCE STR STE 100 LAKE MARY, FL 32746 US |
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04222004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

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|---|--------------------------------|
| 4. FEI Number 59-2823958 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent LATHAN, ROY R 103 COMMERCE ST. SUITE 100 LAKE MARY, FL 32746 |
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | 1000000127905 04/26/04-80016-016 150.00 |
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| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PV LATHAN, LOUISE D. 103 COMMERCE ST., STE. 100 LAKE MARY, FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP LATHAN, ROY 103 COMMERCE ST., STE. 100 LAKE MARY, FL |
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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: Louise D Lathan Sec LOUISE D LATHAN 4-23-04 (407) 333-9100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #