

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K42638

FILED
Apr 26, 2004
Secretary of State

Entity Name: BILL KASPER CONSTRUCTION COMPANY, INC.

Current Principal Place of Business:

P.O. BOX 44
GOTHA, FL 347340044

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 44
GOTHA, FL 347340044

New Mailing Address:

FEI Number: 59-2938456

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KASPER, BILL
9675 WILD OAK DRIVE
WINDERMERE, FL 32786 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: KASPER, BILL,
Address: 9675 WILD OAK DRIVE
City-St-Zip: WINDERMERE, FL 34786

Title: ST () Delete
Name: KASPER, STEVEN
Address: 9675 WILD OAK DRIVE
City-St-Zip: WINDERMERE, FL 34786

Title: VP () Delete
Name: KASPER, DANIEL
Address: 9675 WILD OAK DR
City-St-Zip: WINDERMERE, FL 34786

Title: VP () Delete
Name: KASPER, CHRIS
Address: 9675 WILD OAK DR
City-St-Zip: WINDERMERE, FL 34786

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KASPER, BILL
Address: 9675 WILD OAK DRIVE
City-St-Zip: WINDERMERE, FL 34786

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: LASITTER, MAYNARD
Address: 4617 MILCOVE DR
City-St-Zip: ORLANDO, FL 32812

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: BILL KASPER

P

04/26/2004

Electronic Signature of Signing Officer or Director

_____ Date