

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # L13949 1. Entity Name CSB CONSTRUCTION, INC.					
Principal Place of Business 5742 ASPEN RIDGE CIRCLE SUITE C-2 DELRAY BEACH, FL 33484		Mailing Address 5742 ASPEN RIDGE CIRCLE SUITE C-2 DELRAY BEACH, FL 33484			
DO NOT WRITE IN THIS SPACE					
				 04272005 No Chg-P CR2E034 (10/03)	
		4. FEI Number 65-0146052		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BALDWIN, CHARLES S 5742 ASPEN RIDGE CIRCLE DELRAY BEACH, FL 33484				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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS				DO NOT WRITE IN THIS SPACE U00000357280 05/04/05-80068-016 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		CEOP BALDWIN, CHARLES S 5742 ASPEN RIDGE CIRCLE DELRAY BEACH, FL 33484			
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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: <u>Charles S. Baldwin / Charles S. Baldwin</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				4-27-05 561-495-2582 Date Daytime Phone #	