

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 19, 2004 08:00 AM
Secretary of State

DOCUMENT # L72775

1. Entity Name

D. JANCA BUILDER, INC.



Principal Place of Business

C/O ROBERT DAVID JANCA JR.
PO BOX 5376
DESTIN, FL 32540

Mailing Address

C/O ROBERT DAVID JANCA JR.
PO BOX 5376
DESTIN, FL 32540



02122004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3019689

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JANCA, JR., ROBERT DAVID
200 DOLPHIN ESTATES COURT
DESTIN, FL 32541

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IN THIS SPACE**

B. 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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000092891
03/19/04-80027-004 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	JANCA, ROBERT DAVID JR.
STREET ADDRESS	200 DOLPHIN ESTATES CT.
CITY-ST-ZIP	DESTIN, FL
TITLE	S
NAME	JANCA, EDITH E.
STREET ADDRESS	200 DOLPHIN ESTATES CT.
CITY-ST-ZIP	DESTIN, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
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)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

R. DAVID JANCA

2-29-04 86585-2547

Date

Daytime Phone #