## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # L83002

FOUR H CONSTRUCTION COMPANY, INC.



**FILED** May 03, 2004 08:00 AM Secretary of State

Principal Place of Business 2115 JONATHAN LANE, S.E. Mailing Address

WINTER HAVEN, FL 33884-3100

PO BOX 1391 WINTER HAVEN, FL 33882

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04152004 No Chg-P CR2E034 (10/03)

## DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For 59-3024280 Not Applicable \$8.75 Additional

5. Certificate of Status Desired

Fee Required

8. Name and Address of Current Registered Agent

HEATH, WARREN K., II 2115 JONATHAN LANE, S.E. WINTER HAVEN, FL 33884-3100

## DO NOT WRITE IN THIS SPACE

the obligati	ne 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 stile in	applicable. (NOTE: R	logistered Agent eignature	s required when reinstating)	DATE			
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	9. Election Campaign Trust Fund Contrib		\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	TORS						
title Name Street Address City-St-Zip	P HEATH, WARREN, II 2115 JONATHAN LANE, S.E. WINTER HAVEN, FL 338843100				UQ0000150332 05/04/04-80002-004 150.00			
TITLE NAME STREET ADDRESS CITY+ST-ZIP	ST HEATH, PAMELA S. 2115 JONATHAN LANE, S.E. WINTER HAVEN, FL 338843100				· · · · · · · · · · · · · · · · · · ·			
TITLE Name Street Address, City-St-Zip				DO	NOT WRITE			
title name street address city-st-zip			·	IN T	THIS SPACE			
TITLE NAME STREET ADDRESS CITY - ST-ZIP				· <del>_</del>				
TITLE HAME STREET ADDRESS CITY-ST-ZIP								

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 charged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

863-04 324 5248