
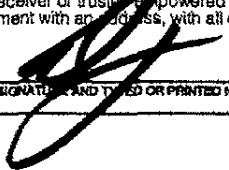


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # L89297 1. Entity Name D.C. MOXLEY CONTRACTING, INC.		
Principal Place of Business 1704 AURORA ROAD #A MELBOURNE, FL 32935	Mailing Address 1704 AURORA ROAD #A MELBOURNE, FL 32935	
INCLUDE IN THIS SPACE		
6. Name and Address of Current Registered Agent FALLACE, JAMES H PA 1900 S HICKORY STREET STE A MELBOURNE, FL 32901		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>		
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
10. OFFICERS AND DIRECTORS		1100000154237 05/04/04-80180-004 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST MOXLEY, DANNY C 1704 A AURORA ROAD MELBOURNE, FL 32935	
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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:  Danny C. Moxley President <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		