

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000008056

FILED
Apr 19, 2005
Secretary of State

Entity Name: BATES & COMPANY CONSTRUCTION INC.

Current Principal Place of Business:

1200 S. ROGERS CIRCLE
#4
BOCA RATON, FL 33487

New Principal Place of Business:

6730 NW 83RD TERR
PARKLAND, FL 33067

Current Mailing Address:

1200 S. ROGERS CIRCLE
#4
BOCA RATON, FL 33487

New Mailing Address:

6730 NW 83RD TERR
PARKLAND, FL 33067

FEI Number: 65-0998926

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BATES, WILLIAM T
6730 NW 83 TERRACE
PARKLAND, FL 33067 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: BATES, WILLIAM T
Address: 6730 NW 83RD TERRACE
City-St-Zip: PARKLAND, FL 33067

Title: VP () Delete
Name: BATES, KATHY J
Address: 6730 NW 83 TERR
City-St-Zip: PARKLAND, FL 33067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: WILLIAM T. BATES

P

04/19/2005

Electronic Signature of Signing Officer or Director

_____ Date