

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000017878

FILED  
Jan 06, 2004  
Secretary of State

**Entity Name:** CONTRACTOR'S FRAMING & STUCCO, INC.

**Current Principal Place of Business:**

901 ACADEMY DRIVE  
BRANDON, FL 33511 US

**New Principal Place of Business:**

**Current Mailing Address:**

901 ACADEMY DRIVE  
BRANDON, FL 33511 US

**New Mailing Address:**

**FEI Number:** 59-3626251

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NICHOLAS, DAN  
901 ACADEMY DR.  
BRANDON, FL

**Name and Address of New Registered Agent:**

NICHOLAS, DANIEL A PRES.  
901 ACADEMY DR.  
BRANDON, FL 33511

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:** DANIEL A. NICHOLAS

01/06/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** D ( ) Delete  
**Name:** NICHOLAS, DAN  
**Address:** 901 ACADEMY DR.  
**City-St-Zip:** BRANDON, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** PRES (X) Change ( ) Addition  
**Name:** NICHOLAS, DAN  
**Address:** 901 ACADEMY DR.  
**City-St-Zip:** BRANDON, FL 33511

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:** DANIEL A. NICHOLAS

PRES

01/06/2004

Electronic Signature of Signing Officer or Director

Date