

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 91117 001 ***476.25

DOCUMENT # P00000019991

1. Entity Name
CALPAC CONSTRUCTION, INC.



Principal Place of Business
700 BENJAMIN FRANKLIN DRIVE
SARASOTA, FL 34236

Mailing Address
700 BENJAMIN FRANKLIN DRIVE
SARASOTA, FL 34236

66415424



04202004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0991929	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

SCHOUTEN, DIANE
700 BENJAMIN FRANKLIN DRIVE
SARASOTA, FL 34236

**DO NOT WRITE
IN THIS SPACE**

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

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**

10. OFFICERS AND DIRECTORS

TITLE	CPD
NAME	HASSELL, ROBERT W
STREET ADDRESS	700 BENJAMIN FRANKLIN DRIVE
CITY-ST-ZIP	SARASOTA, FL 34236

TITLE	VPFD
NAME	SCHOUTEN, DIANE
STREET ADDRESS	700 BENJAMIN FRANKLIN DRIVE
CITY-ST-ZIP	SARASOTA, FL 34236

TITLE	STD
NAME	HASSELL, FLORENCE G
STREET ADDRESS	700 BENJAMIN FRANKLIN DRIVE
CITY-ST-ZIP	SARASOTA, FL 34236

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)(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:

D. Schouten **D. SCHOUTEN**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/19/04
Date

941-388-5273
Daytime Phone #