## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## **Secretary of State** DOCUMENT # P00000040729 07-15-2004 90002 003 \*\*\*150.00 C.L.B. CONSTRUCTION, INC. Principal Place of Business Mailing Address 14980 LAKE HOUSE LANE,H-5 14980 LAKE HOUSE LANE, H-5 54062398 NAPLES, FL 34110 NAPLES, FL 34110 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 07082004 Chq-P City & State City & State 4. FEI Number Applied For 59-3657963 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BUTT, LOREN A. Street Address (P.O. Box Number is Not Acceptable) 14980 LAKE HOUSE LANE CONDO H5 NAPLES, FL 34110 Zip Code 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Due by September 8, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Change ☐ Addition ☐ Delete TITLE TITLE BUTT, LOREN A NAME NAME STREET ADDRESS STREET ADDRESS 14980 LAKE HOUSE LANE, H-5 CITY-ST-ZIP NAPLES, FL 34110 CITY - ST - ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST- ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ---- 🖃 Change --- 📳 Addition TITLE TITLE" NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZiP ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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.

FILED Jul 15, 2004 8:00 am

Davtime Phone #

Attachment 54062398 Du. # \$00000040729



## C.L.B. Construction, Inc.

14980 Lake House Lane Condo H5 Naples, Florida 34110 Home (239) 591-8224 Cell (239) 269-4073 Fax (239) 591-2967

I never Received a Report Before This Date -

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