


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 20, 2004 8:00 am
Secretary of State

04-20-2004 90035 030 ***158.75

DOCUMENT # P00000061537 1. Entity Name FLORIDA STATE METAL BUILDING ERECTORS, INC.	
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Principal Place of Business 1207 BELLSHOALS RD. BRANDON, FL 33511	Mailing Address 1207 BELLSHOALS RD. BRANDON, FL 33511
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DO NOT WRITE IN THIS SPACE

04052004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3656090	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**TILLANDER, RICHARD
1207 BELLSHOALS RD.
BRANDON, FL 33511**

**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. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD TILLANDER, RICHARD 1207 BELLSHOALS RD. BRANDON, FL 33511
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**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 or other like empowered.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/04 **813-655-6529**
Date Daytime Phone #