

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000064452

Entity Name: FADEN BUILDERS, INC.

FILED  
Apr 02, 2004  
Secretary of State

## Current Principal Place of Business:

7072 LAKE OLA DR  
MT DORA, FL 32757

## New Principal Place of Business:

1101 ROBIE AVE.  
MT DORA, FL 32757

## Current Mailing Address:

P O BOX 242  
TANGERINE, FL 32777

## New Mailing Address:

FEI Number: 59-3659554

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FADEN, TODD M  
7072 LAKE OLA DR  
MT DORA, FL 32757

## 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: FADEN, TODD  
Address: 6923 OSWEGO DR  
City-St-Zip: MOUNT DORA, FL 32757

Title: TSVP ( ) Delete  
Name: FADEN, LAURA  
Address: 6923 OSWEGO DR  
City-St-Zip: MOUNT DORA, FL 32757

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: FADEN, TODD  
Address: 7072 LAKE OLA DR.  
City-St-Zip: MOUNT DORA, FL 32757

Title: TSVP (X) Change ( ) Addition  
Name: FADEN, LAURA  
Address: 7072 LAKE OLA DR.  
City-St-Zip: MOUNT DORA, FL 32757

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: TODD M. FADEN

PRES

04/02/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date