
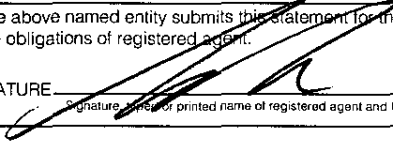
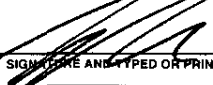


2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P00000100061 1. Entity Name LSW BUILDERS, INC.						<div style="font-size: 2em; font-weight: bold; transform: rotate(-5deg);">FILED</div> <div style="font-size: 1.2em;">04 APR 30 AM 11:05</div> <div style="font-size: 0.8em;">SECRETARY OF STATE TALLAHASSEE, FLORIDA</div>	
Principal Place of Business 604 NE 15TH COURT CAPE CORAL, FL 33909				Mailing Address 604 NE 15TH COURT CAPE CORAL, FL 33909			
2. Principal Place of Business		3. Mailing Address				04192004 Chg-P CR2E034 (10/03)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Country		Zip		Country		4. FEI Number 65-1048802	
						5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FINANCIAL FOUNDATIONS, INC. 3150 RIDGE DR CLEARWATER, FL 33761				7. Name and Address of New Registered Agent Name Linda S. Wachholder Street Address (P.O. Box Number is Not Acceptable) 604 NE 15th Ct. City Cape Coral FL Zip Code 33909			
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  Linda Wachholder President 4/19/04 <small>(Signature of registered agent or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE)</small>							
Amended AR is \$61.25				9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees Trust Fund Contribution.			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE P <input checked="" type="checkbox"/> Delete NAME WACHHOLDER, LINDA S STREET ADDRESS 606 SW 25TH LANE CITY-ST-ZIP CAPE CORAL, FL 33914				TITLE VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition NAME Warren Wachholder II STREET ADDRESS 1801 Brantley Rd #1515 CITY-ST-ZIP Ft Myers, FL 33991			
TITLE VP <input checked="" type="checkbox"/> Delete NAME WACHHOLDER, WARREN A STREET ADDRESS 606 SW 25TH LANE CITY-ST-ZIP CAPE CORAL, FL 33914				TITLE VP <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME WACHHOLDER, LINDA S STREET ADDRESS 128 SW 15TH PLACE CITY-ST-ZIP CAPE CORAL, FL 33991			
TITLE P <input type="checkbox"/> Delete NAME WACHHOLDER, LINDA S STREET ADDRESS 128 SW 15TH PLACE CITY-ST-ZIP CAPE CORAL, FL 33991				TITLE VP <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME WACHHOLDER, WARREN A STREET ADDRESS 128 SW 15TH PLACE CITY-ST-ZIP CAPE CORAL, FL 33991			
TITLE VP <input type="checkbox"/> Delete NAME WACHHOLDER, WARREN A STREET ADDRESS 128 SW 15TH PLACE CITY-ST-ZIP CAPE CORAL, FL 33991				TITLE VP <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME WACHHOLDER, WARREN A STREET ADDRESS 128 SW 15TH PLACE CITY-ST-ZIP CAPE CORAL, FL 33991			
TITLE VP <input type="checkbox"/> Delete NAME WACHHOLDER, WARREN A STREET ADDRESS 128 SW 15TH PLACE CITY-ST-ZIP CAPE CORAL, FL 33991				TITLE VP <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME WACHHOLDER, WARREN A STREET ADDRESS 128 SW 15TH PLACE CITY-ST-ZIP CAPE CORAL, FL 33991			
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TITLE VP <input type="checkbox"/> Delete NAME WACHHOLDER, WARREN A STREET ADDRESS 128 SW 15TH PLACE CITY-ST-ZIP CAPE CORAL, FL 33991				TITLE VP <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME WACHHOLDER, WARREN A STREET ADDRESS 128 SW 15TH PLACE CITY-ST-ZIP CAPE CORAL, FL 33991			
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:  Linda Wachholder 4/19/04 239-574-4721 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>							