

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P00000116642

1. Entity Name
D&C CONSTRUCTION, INC.



FILED
Apr 30, 2004 08:00 AM
Secretary of State

Principal Place of Business
3531 LORETTO RD.
JACKSONVILLE, FL 32223

Mailing Address
3531 LORETTO RD.
JACKSONVILLE, FL 32223

DO NOT WRITE IN THIS SPACE

04282004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3688145

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

FUTCH, DEAN R
3531 LORETTO RD.
JACKSONVILLE, FL 32223

**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 PD
NAME FUTCH, DEAN
STREET ADDRESS 3531 LORETTO RD.
CITY-ST-ZIP JACKSONVILLE, FL 32223

TITLE ST
NAME FUTCH, JILL O
STREET ADDRESS 3531 LORETTO RD.
CITY-ST-ZIP JACKSONVILLE, FL 32223

TITLE V
NAME STITT, IAN
STREET ADDRESS 4941 PANTHER TRAIL
CITY-ST-ZIP KEYSTONE HEIGHTS, FL 32656

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

00000116642
04/30/04-80100-009 150.00

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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: *Jill O Futch* JILL O FUTCH
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/04 904-880-0875
Date Daytime Phone #