


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 22, 2004 8:00 am**  
**Secretary of State**

04-22-2004 90069 011 \*\*\*150.00

<b>DOCUMENT # P01000016199</b>					
<b>1. Entity Name</b> RICKY L. BELL PAVING, INC.					
<b>Principal Place of Business</b> 2662 RIVERVIEW DRIVE NAPLES, FL 34112			<b>Mailing Address</b> 2662 RIVERVIEW DRIVE NAPLES, FL 34112		
<b>2. Principal Place of Business</b> 6641 Sandalwood Ln		<b>3. Mailing Address</b> 6641 Sandalwood Ln			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
<b>City &amp; State</b> Naples Florida		<b>City &amp; State</b> Naples Florida		<b>4. FEI Number</b> 59-3698681	
<b>Zip</b> 34109		<b>Country</b> USA		<b>Applied For</b> Not Applicable	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>			
<b>6. Name and Address of Current Registered Agent</b> BELL, RICKY L 2662 RIVERVIEW DRIVE NAPLES, FL 34112			<b>7. Name and Address of New Registered Agent</b>		
Name			Street Address (P.O. Box Number is Not Acceptable)		
City			FL Zip Code		
<b>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.</b> SIGNATURE: <i>Ricky L. Bell</i> DATE: 4-19-04					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
<b>TITLE</b> D	<b>NAME</b> BELL, RICKY L		<input type="checkbox"/> Delete	<b>TITLE</b> Ricky L. Bell	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>STREET ADDRESS</b> 2662 RIVERVIEW DRIVE	<b>CITY-ST-ZIP</b> NAPLES, FL 34112		<b>STREET ADDRESS</b> 6641 Sandalwood Lane	<b>CITY-ST-ZIP</b> Naples, FL 34109	
<b>TITLE</b> NAME	<b>STREET ADDRESS</b> CITY-ST-ZIP		<input type="checkbox"/> Delete	<b>TITLE</b> NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME	<b>STREET ADDRESS</b> CITY-ST-ZIP		<input type="checkbox"/> Delete	<b>TITLE</b> NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME	<b>STREET ADDRESS</b> CITY-ST-ZIP		<input type="checkbox"/> Delete	<b>TITLE</b> NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME	<b>STREET ADDRESS</b> CITY-ST-ZIP		<input type="checkbox"/> Delete	<b>TITLE</b> NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>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.</b>					
<b>SIGNATURE:</b> <i>Ricky L. Bell</i>			4-19-04 (239) 775-4772		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		