

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000035685

FILED  
Apr 24, 2004  
Secretary of State

**Entity Name:** AUSTIN CONSTRUCTION SPECIALTIES, INC.

**Current Principal Place of Business:**

4545 RADIO ROAD  
NAPLES, FL 34104

**New Principal Place of Business:**

4651 ARNOLD AVENUE  
NAPLES, FL 34104

**Current Mailing Address:**

4545 RADIO ROAD  
NAPLES, FL 34104

**New Mailing Address:**

4651 ARNOLD AVENUE  
NAPLES, FL 34104

**FEI Number:** 65-1104121

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

AUSTIN, MIKE  
242 PINE VALLEY CIR  
NAPLES, FL 34113 US

**Name and Address of New Registered Agent:**

BAVIELLO, MICHAEL A JR.  
1025 FIFTH AVENUE NORTH  
NAPLES, FL 34102 US

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: MICHAEL A. BAVIELLO JR

04/24/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: AUSTIN, MIKE J  
Address: 242 PINE VALLEY CIRCLE  
City-St-Zip: NAPLES, FL 34113

Title: VS ( ) Delete  
Name: AUSTIN, MARK J  
Address: 1875 SNOOK DRIVE  
City-St-Zip: NAPLES, FL 34113

Title: T ( ) Delete  
Name: CERE, STEVE  
Address: 4108 CINDY AVENUE  
City-St-Zip: NAPLES, FL 34112

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: AUSTIN, MICHAEL J  
Address: 4651 ARNOLD AVENUE  
City-St-Zip: NAPLES, FL 34102

Title: VS (X) Change ( ) Addition  
Name: AUSTIN, MARK J  
Address: 4651 ARNOLD AVENUE  
City-St-Zip: NAPLES, FL 34102

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MICHAEL J. AUSTIN

P

04/24/2004

Electronic Signature of Signing Officer or Director

Date