

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000039733

FILED  
Jan 15, 2004  
Secretary of State

Entity Name: TONEY SULLIVAN CONSTRUCTION, INC.

## Current Principal Place of Business:

P.O. BOX 491  
NEWBERRY, FL 32669

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 491  
NEWBERRY, FL 32669

## New Mailing Address:

FEI Number: 59-3663340

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SULLIVAN, TONEY II  
25725 NW 6 AVE  
NEWBERRY, FL 32669 US

## Name and Address of New Registered Agent:

SULLIVAN, TONEY II  
P.O. BOX 491  
NEWBERRY, FL 32669 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:

01/15/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: SULLIVAN, TONEY  
Address: P.O. BOX 491  
City-St-Zip: NEWBERRY, FL 32669

Title: VP ( ) Delete  
Name: SULLIVAN, CHRISTY  
Address: PO BOX 491  
City-St-Zip: NEWBERRY, FL 32669

Title: ST ( ) Delete  
Name: SULLIVAN, VONDLA  
Address: PO BOX 491  
City-St-Zip: NEWBERRY, FL 32669

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: SULLIVAN, TONEY II  
Address: P.O. BOX 491  
City-St-Zip: NEWBERRY, FL 32669

Title: VP (X) Change ( ) Addition  
Name: SULLIVAN, CHRISTY A  
Address: PO BOX 491  
City-St-Zip: NEWBERRY, FL 32669

Title: ST (X) Change ( ) Addition  
Name: SULLIVAN, VONDLA D  
Address: PO BOX 491  
City-St-Zip: NEWBERRY, FL 32669

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: CHRISTY A. SULLIVAN

VP

01/15/2004

Electronic Signature of Signing Officer or Director

Date