

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000081981
 1. Entity Name
MINNEAR CONSTRUCTION CORPORATION



Principal Place of Business
3756 SOUTHRIDGE CIRCLE
TITUSVILLE, FL 32796

Mailing Address
3756 SOUTHRIDGE CIRCLE
TITUSVILLE, FL 32796



03162004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3741772

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

MINNEAR, JAMES T
3756 SOUTHRIDGE CIRCLE
TITUSVILLE, FL 32796

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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 _____ (NOTE Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

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	D
NAME	MINNEAR, JAMES T
STREET ADDRESS	3756 SOUTHRIDGE CIRCLE
CITY-ST-ZIP	TITUSVILLE, FL 32796
TITLE	D
NAME	MINNEAR, TRACY C
STREET ADDRESS	3756 SOUTHRIDGE CIRCLE
CITY-ST-ZIP	TITUSVILLE, FL 32796
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 04/28/04-80025-012 150.00

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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: J. T. Minnear **J. T. Minnear** 4/25/04 321-861-3690
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #