


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 27, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P02000016081  
 1. Entity Name  
 ANDERSON BUILDERS, INC.



Principal Place of Business      Mailing Address  
 307 NESBIT ST.                      307 NESBIT ST.  
 PUNTA GORDA, FL 33950          PUNTA GORDA, FL 33950

**DO NOT WRITE IN THIS SPACE**



04222005    No Chg-P    CR2E034 (10/03)

4. FEI Number      Applied For  
 01-0595419      Not Applicable

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

6. Name and Address of Current Registered Agent

ANDERSON, RICHARD I  
 1316 COLUMBIAN DR.  
 PUNTA GORDA, FL 33950

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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 \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 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	ANDERSON, RICHARD I
STREET ADDRESS	1316 COLUMBIAN DR.
CITY-ST-ZIP	PUNTA GORDA, FL 33950
TITLE	STD
NAME	ANDERSON, RICHARD W
STREET ADDRESS	449 ROYAL POINCIANA APT. 311
CITY-ST-ZIP	PUNTA GORDA, FL 33955
TITLE	VD
NAME	ANDERSON, DAVID M
STREET ADDRESS	25298 ISLIS DR.
CITY-ST-ZIP	PUNTA GORDA, FL 33955
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000335250  
 04/27/05-80076-023 150.00

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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)(f), 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: Richard I. Anderson    RICHARD I. ANDERSON    4/22/05    941 6319387

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #