

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 05, 2004 8:00 am**  
**Secretary of State**

04-05-2004 90385 023 \*\*\*150.00

**DOCUMENT # P02000018526**

1. Entity Name

SCHURGARD CONSTRUCTION, INC.



Principal Place of Business

6915 NORTH 16TH STREET  
TAMPA FL 33610

Mailing Address

6915 NORTH 16TH STREET  
TAMPA FL 33610

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

90-0015024

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI FL 33145

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSTD ☐ Delete  
NAME SCHURGARD, JOHN M  
STREET ADDRESS 6915 NORTH 16TH STREET  
CITY-ST-ZIP TAMPA FL 33610

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
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TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*John M. Schurgard*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*3/26/04*  
Date

*813-231-2647*  
Daytime Phone #

*Allocated*  
24034678

*Doc 002 0000185-26*

SCHURGARD CONSTRUCTION INC.

CERAMIC TILE SUB-CONTRACTOR

6915 N. 16TH STREET, TAMPA FL. 33610  
813-231-2647  
CELL-813-231-2647  
imMrTile@AOL.COM

March 26, 2004

PAGE : 1 OF 1

TO: WHOM THIS MAY CONCERN

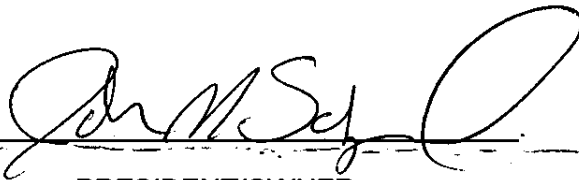
RE: BUISNESS CLOSED

TAX I.D. # 90-0015024

AS OF FEBUARY 27, 2004, SCHURGARD CONSTRUCTION INC. IS  
NO LONGER DOING BUISNESS.

AS OF MARCH 26, 2004, SCHURGARD CONSTRUCTION INC. HAS  
NOT EARNED ANY MONIES AND WILL NOT EARN ANY MONIES.

JOHN M. SCHURGARD:



PRESIDENT/OWNER

