

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Sep 01, 2004 8:00 am**  
**Secretary of State**

09-01-2004 90007 039 \*\*\*150.00

DOCUMENT # P02000019165

1. Entity Name

JC DOCKS AND SEAWALLS INC



Principal Place of Business

915 N 11TH STREET  
EAGLE LAKE FL 33839

Mailing Address

P O BOX 21  
EAGLE LAKE FL 33839

2. Principal Place of Business

231 Eagle Lake Loop Rd  
Suite, Apt. #, etc.

3. Mailing Address

231 Eagle Lake Loop Rd  
Suite, Apt. #, etc.



MOORE

CR2E034 (4/04)

City & State

Winter Haven, FL Winter Haven FL

Zip  
33880

Country

Polk

Zip

33880

Country

Polk

4. FEI Number

01-0604410

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CARVER, JOHN  
915 N 11TH STREET  
EAGLE LAKE FL 33839

7. Name and Address of New Registered Agent

Name

CARVER John

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

231 Eagle Lake Loop Rd.

City

Winter Haven

FL

Zip Code

33880

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 \$550.00**

**DUE BY September 8, 2004**

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

\$ 607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☒

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE P  
NAME CARVER, JOHN ☐ Delete  
STREET ADDRESS 915 N 11TH STREET  
CITY-ST-ZIP EAGLE LAKE FL 33839

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE R CARVER John ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 231 Eagle Lake Loop Rd  
CITY-ST-ZIP Winter Haven, FL 33880

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

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

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

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

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 Carver John CARVER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-26-2004 863-325-9841

Date

Daytime Phone #