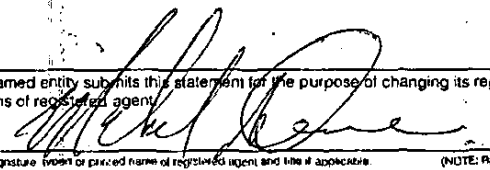
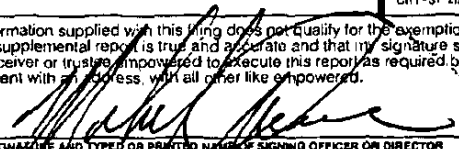


FILED
Sep 22, 2004 8:00 am
Secretary of State

08-18-2004 90006 031 ***550.00

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P02000028758			
1. Entity Name ARJAY BUILDING CORPORATION			
Principal Place of Business 602 HARRISON DRIVE LEHIGH ACRES, FL 33936		Mailing Address 602 HARRISON DRIVE LEHIGH ACRES, FL 33936	
2. Principal Place of Business 1111 MAPLE AVE N.		3. Mailing Address 1111 MAPLE AVE N.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State LEHIGH ACRES FL		City & State LEHIGH ACRES FL	
Zip 33972	Country USA	Zip 33972	Country USA
4. FEI Number 20-089-6557 APPLIED FOR		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DEANE, MICHAEL A SR. 602 HARRISON DRIVE LEHIGH ACRES, FL 33936		7. Name and Address of New Registered Agent Name DEANE, MICHAEL A. SR Street Address (P.O. Box Number is Not Acceptable) 1111 MAPLE AVE N. City LEHIGH ACRES FL Zip Code 33972	
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  DATE 9/19/04 Signature: Print or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when transferring) DATE			
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004		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 NAME STREET ADDRESS CITY-ST-ZIP	PD DEANE, MICHAEL A SR. 602 HARRISON DRIVE LEHIGH ACRES, FL 33936 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JAMIE LYNN DEANE 1111 MAPLE AVE N. LEHIGH ACRES, FL 33972 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DEANE, MICHAEL A JR. 502 LINCOLN AVE N LEHIGH ACRES, FL 33972 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MICHAEL A. DEANE 1111 MAPLE AVE N. LEHIGH ACRES, FL 33972 ☒ Change ☐ Addition ADDRESS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DEANE, JAYMIE L 502 LINCOLN AVE N LEHIGH ACRES, FL 33972 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SCHMIDT, KURT D 14680 WEST HALL CT FORT MYERS, FL 33905 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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 address, with all other like empowered.			
SIGNATURE: 		8/10/04 Daytime Phone #	