

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 19, 2004 8:00 am
Secretary of State

03-19-2004 90046 004 ***150.00

DOCUMENT # P02000078726

1. Entity Name

SABAL PALM CONSTRUCTION, INC.



Principal Place of Business

1489 NE 23RD TERRACE 830 NE Pop Tilton Place
JENSEN BEACH FL 34957

Mailing Address

1489 NE 23RD TERRACE 830 NE Pop Tilton Place
JENSEN BEACH FL 34957

J4U1J3J1



MOORE CR2E034 (11/03)

2. Principal Place of Business

830 NE Pop Tilton Place
Suite, Apt. #, etc.

3. Mailing Address

830 NE Pop Tilton Place
Suite, Apt. #, etc.

City & State

Jensen Beach, FL

City & State

Jensen Beach, FL

4. FEI Number

54-2064961

Applied For

Not Applicable

Zip

34957

Country

USA

Zip

34957

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

VOSTERS, DOUGLAS B
1489 NE 23RD TERRACE 830 NE Pop Tilton Place
JENSEN BEACH FL 34957

7. Name and Address of New Registered Agent

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]

Douglas B. Vosters

3-16-04

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

TITLE P ☒ Delete
NAME MCDANIEL, OTIS
STREET ADDRESS 3130 NE HICKORY RIDGE DRIVE
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE VP/S ☐ Delete
NAME VOSTERS, DOUGLAS B
STREET ADDRESS 1489 NE 23RD TERRACE
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE T ☐ Delete
NAME LOGSDON, SCOTT W
STREET ADDRESS 1805 NW FORK RD.
CITY-ST-ZIP STUART FL 34994

TITLE Vice Pres./Secretary ☐ Delete
NAME Bryan Polhemus
STREET ADDRESS 1384 NW Coconut Pt. Rd.
CITY-ST-ZIP Stuart, FL 34994

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

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

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

TITLE VP/S Vice President/Secretary ☐ Change ☒ Addition
NAME Bryan Polhemus
STREET ADDRESS 1384 NW Coconut Pt. Rd.
CITY-ST-ZIP Stuart, FL 34994

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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-16-04

Date

772-232-2088

Daytime Phone #