

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000129118

FILED
Jan 23, 2004
Secretary of State

Entity Name: T.W. ROBERTSON MECHANICAL, INC.

Current Principal Place of Business:

6254 POWERS AVE., STE 49
JACKSONVILLE, FL 32217

New Principal Place of Business:

Current Mailing Address:

PO BOX 5396
JACKSONVILLE, FL 32247

New Mailing Address:

FEI Number: 06-1666884

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTSON, TIMOTHY W
4030 PITTMAN DR.
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: ROBERTSON, TIMOTHY W
Address: 4030 PITTMAN DR.
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: VP () Delete
Name: ROBERTSON, BRENDA D
Address: 4030 PITMAN DR.
City-St-Zip: JACKSONVILLE, FL 32207

Title: VPS () Delete
Name: SWEAT, JOE M
Address: 2785 BROCKWOOD DR.
City-St-Zip: ORANGE PARK, FL 32073

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPSV () Change (X) Addition
Name: HUNTER, ROBERT M JR
Address: 3718 ROBERT SCOTT COURT
City-St-Zip: JACKSONVILLE, FL 32207

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY W ROBERTSON

PST

01/23/2004

Electronic Signature of Signing Officer or Director

Date