

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 13, 2004 8:00 am
Secretary of State

08-27-2004 90099 001 ***150.00
08-27-2004 90099 002 ***400.00

DOCUMENT # P03000000873 1. Entity Name APARTMENT PREPARATION & MAINTENANCE, INC.					
Principal Place of Business 464 W PIPKIN ROAD STE 1 LAKELAND, FL 33813			Mailing Address 464 W PIPKIN ROAD STE 1 LAKELAND, FL 33813		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		07292004 Chg-P CR2E034 (10/03)	
4. FEI Number 27-0040836				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DANIEL MEDINA PA 464 W PIPKIN ROAD STE 1 LAKELAND, FL 33813			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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	D BORDEN, BARRY A 2332 LINWOOD AVE SANTA ROSA, CA 95404	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BORDEN, GAIL F 3226 STONEWATER DR LAKELAND, FL 33803	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 an address, with all other like empowered.					
SIGNATURE: <i>Gail F Borden</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			9/30/04 (663) 682-8184 5:15 PM <small>Date Daytime Phone #</small>		



Attachment
DANIEL MEDINA, P.A.
ATTORNEY AT LAW

66433465

DANIEL MEDINA, LL. M.*
*FLORIDA BAR BOARD CERTIFIED
WILLS, TRUSTS & ESTATES

September 9, 2004

Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500

In re: Apartment Preparation & Maintenance, Inc.
Reference Number: P03000000873

Dear Sir or Madam:

As requested in your letter dated August 31, 2004, enclosed is the corrected 2004 for Profit Corporation Annual Report for the above referenced matter.

If you should have any further questions, please contact my office. Thank you for your assistance in this matter.

Sincerely,
Daniel Medina, P.A.

By:

Daniel Medina, LL.M.

DM/emh

Enclosures (as stated)

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DANIEL MEDINA, LL.M.*
*FLORIDA BAR BOARD CERTIFIED
WILLS, TRUSTS & ESTATES



DANIEL MEDINA, P.A.
ATTORNEY AT LAW

Attachment

PS000000873

66433465

August 19, 2004

Division of Corporations
P.O. Box 15000
Tallahassee, FL 32302-1500

In Re: Our Matter 02-272 Apartment Preparation & Maintenance, Inc.

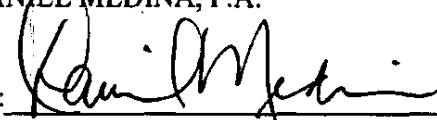
Dear Sir or Madam:

Enclosed please find the 2004 Annual Report for the above-mentioned corporation. Also enclosed please find check no. 1117 payable in the amount of \$150.00 for filing fees.

In addition, check no. 1553 in the amount of \$400.00 is enclosed for the penalty fee for filing the Annual Report late. Thank you for your attention to this matter. Please call me at the number shown above with any questions or comments.

Sincerely,
DANIEL MEDINA, P.A.

By:


Daniel Medina, LL.M.

DM/cs
Enclosures (as stated)