

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000037362

1. Entity Name
REGATTA CONSTRUCTION OF SOUTH FLORIDA, INC.



FILED

04 OCT -7 PM 2:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
2345 14TH AVENUE SUITE 6
VERO BEACH, FL 32960

Mailing Address
2345 14TH AVENUE SUITE 6
VERO BEACH, FL 32960

2. Principal Place of Business

3. Mailing Address
P. O. Box 2587

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07132004

Chg-P

CR2E034 (10/03)

City & State

City & State
Vero Beach, FL

4. FEI Number
20-0212323

Applied For
Not Applicable

Zip Country

Zip Country
32961 USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WITHEROW, DENNIS J
2345 14TH AVENUE
VERO BEACH, FL 32960

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when restoring)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
D
WITHEROW, DENNIS J
2345 14TH AVENUE SUITE 6
VERO BEACH, FL 32960

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
600041566606
10/07/04--01015--015 ***150.00

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
D
TELESE, JOSEPH JR
2345 14TH AVENUE SUITE 6
VERO BEACH, FL 32960

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Delete
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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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dennis J. Witherow

7/13/04

772-564-9220

Date

Daytime Phone #