

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000042182

Entity Name: HARVEST CONSTRUCTION, INC.

FILED
Apr 29, 2004
Secretary of State

Current Principal Place of Business:

11738 MONTE VISTA ROAD
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:
11738 MONTE VISTA ROAD
CLERMONT, FL 34711

New Mailing Address:

FEI Number: 06-1685550 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GALDONIK, LAWRENCE M III
11738 MONTE VISTA ROAD
CLERMONT, FL 34711

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: PD () Delete
Name: BANNISTER, MIKE
Address: 3105 SURFSIDE WAY
City-St-Zip: ORLANDO, FL 32805

Title: STD (X) Delete
Name: GALDONIK, LAWRENCE M III
Address: 11738 MONT VISTA ROAD
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: GALDONIK, LAWRENCE M III
Address: 11738 MONTE VISTA ROAD
City-St-Zip: CLERMONT, FL 34711

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

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 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: LAWRENCE M. GALDONIK III

PSTD

04/29/2004

Electronic Signature of Signing Officer or Director

Date