

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 15, 2004 8:00 am**  
**Secretary of State**

07-15-2004 90004 044 \*\*\*150.00

<b>DOCUMENT # P03000054472</b> 1. Entity Name <b>PAHLMAN CONSTRUCTION INC.</b>			
Principal Place of Business <b>116 PERRY AVENUE AUBURNDALE, FL 33823</b>		Mailing Address <b>116 PERRY AVENUE AUBURNDALE, FL 33823</b>	
2. Principal Place of Business <b>21 Oakwood Road</b> Suite, Apt. #, etc.		3. Mailing Address <b>21 Oakwood Road</b> Suite, Apt. #, etc.	
City & State <b>Winter Haven, FL</b> Zip <b>33880</b> Country <b>Polk</b>		City & State <b>Winter Haven, FL</b> Zip <b>33880</b> Country <b>Polk</b>	
4. FEI Number <b>43-2014760</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>PAHLMAN, JULIE 116 PERRY AVENUE AUBURNDALE, FL 33823</b>		7. Name and Address of New Registered Agent Name <b>Pahlman, Julie</b> Street Address (P.O. Box Number is Not Acceptable) <b>21 Oakwood Road</b> <b>Winter Haven</b> City <b>FL</b> Zip Code <b>33880</b>	
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 <i>Julie D. Pahlman</i> <b>Julie D. Pahlman, president Pahlman Construction Inc.</b> DATE <b>7/13/04</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> 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 NAME STREET ADDRESS CITY-ST-ZIP	PD <input type="checkbox"/> Delete <b>PAHLMAN, JULIE</b> <b>116 PERRY AVENUE</b> <b>AUBURNDALE, FL 33823</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Pahlman, Julie</b> <b>21 Oakwood Road</b> <b>Winter Haven, FL 33880</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD <input type="checkbox"/> Delete <b>PAHLMAN, JASON</b> <b>116 PERRY AVENUE</b> <b>AUBURNDALE, FL 33823</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Pahlman, Jason</b> <b>21 Oakwood Road</b> <b>Winter Haven, FL 33880</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<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	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	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	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>Julie D. Pahlman</i> <b>Julie D. Pahlman</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <b>7/13/04</b> Daytime Phone # <b>(863) 412-1718 or (863) 967-5853</b>	