

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 02, 2004 8:00 am
Secretary of State

02-02-2004 90002 011 ***150.00

DOCUMENT # P03000075486

1. Entity Name

JOSEPH GARRETT CONSTRUCTION, INC



Principal Place of Business

407 ORLANDO AVE
OCOE FL 34761

Mailing Address

407 ORLANDO AVE
OCOE FL 34761

34000000



MOORE CR2E034 (11/03)

2. Principal Place of Business

407 Orlando Ave.

3. Mailing Address

407 Orlando Ave

Suite, Apt. #, etc.

Ocoee, FL

Suite, Apt. #, etc.

Ocoee, FL

City & State

34761 U.S.

City & State

34761 U.S.

Zip

Country

Zip

Country

4. FEI Number

431976530

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GARRETT, JOSEPH
407 ORLANDO AVE
OCOE FL 34761

7. Name and Address of New Registered Agent

Name

Joseph Garrett

Street Address (P.O. Box Number is Not Acceptable)

407 Orlando Ave

City

Ocoee

FL

Zip Code

34761

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

Joseph Garrett president Joseph Garrett

1/27/04

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME GARRETT, JOSEPH
STREET ADDRESS 407 ORLANDO AVE
CITY-ST-ZIP OCOEE FL 34761

TITLE D ☐ Delete
NAME CARLISLE, JOE
STREET ADDRESS 825 E SILVER STAR RD
CITY-ST-ZIP OCOEE FL 34761

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

Joseph Garrett Joseph Garrett pres.

1/27/04 407-616-9522

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #