2005 FOR PROFIT CORPORATION

FILED Apr 15, 2005 08:00 AM Secretary of State No Chg-P CR2E034 (10/03) Applied For Not Applicable \$8.75 Additional

	ANNUAL REPORT	•	
DOCUMENT #	# P03000093737		

 Entity Name C & S SHEET METAL FABRICATION & INSTALLATION, INC. Principal Place of Business Mailing Address POST OFFICE BOX 730 POST OFFICE BOX 730 DUNNELLON, FL 34430 DUNNELLON, FL 34430 01072005 DO NOT WRITE IN THIS SPACE 4. FEI Number 20-0166794 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DO NOT WRITE TAYLOR, KEITH R 1143 N. LYLE AVENUE CRYSTAL RIVER, FL 34429 IN THIS SPACE 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 reinstating) \$5.00 May Be Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE RUSS, MIKE NAME STREET ADDRESS POST OFFICE BOX 730 CITY-ST-ZIP DUNNELLON, FL 34430 —- U00000306308 04/15/05-20030-015 150.00 TITLE STEVENS, DANNY G NAME POST OFFICE BOX 730 STREET ADDRESS CITY-ST-ZIP DUNNELLON, FL 34430 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CHTY-ST-ZIP

I hereby certify that the information supplied with this filling 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP