2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 02, 2005 08:00 AM Secretary of State

DOCUMENT	#	P03	000	103	169
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1. Entity Name

FRANK SUTER CONSTRUCTION, INC.



Principal Place of Business

119 ORANGE RD, NE LAKE PLACID, FL 33852 Mailing Address

119 ORANGE RD, NE LAKE PLACID, FL 33852



DO NOT WRITE IN THIS SPACE

04192005 No Chg-P CR2E034 (10/03)

5. Certificate of Status Desired	\$8.75 Additional Fee Required	
54-2127638		Not Applicable
4. FEI Number	1	Applied For

Name and Address of Current Registered Agent

SUTER, FRANK 119 ORANGE RD, NE LAKE PLACID, FL 33852

DO NOT WRITE IN THIS SPACE

	The state of the s	: 1		.5. (
	named entity submits this statement for the poons of registered agent.	urpose of changing its registered offic	ce or re	gistered agent, or bol	th, in the State of Florida, I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title if	applicable. (NOTE, Registered Agent s	signature i	required when reinstaling)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May 8e Trust Fund Contribution. Added to Fees		\$5.00 May 8e Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY·ST-ZIP	PD SUTER, FRANK 119 ORANGE RD, NE LAKE PLACID, FL 33852				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HUBER, JOHN 270 CUMQUAT ROAD, N.E. LAKE PLACID, FL 33852				U000003 56996 05/04/05-80055-024 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
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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 cath; 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 attach for with an address, with all other like empowered.

SIGNATURE:

TAA A	RJ	لتبد	es.	Frank	Suter
the Author	ED OF DE	NITED NAME	OF PICKING C	SERCED OR DIRECTOR	

(863) 441-0569 Daysime Phone #