2004 FOR PROFIT CORPORATION > .~ ANNUAL REPORT (AR)

Feb 23, 2004 8:00 am **Secretary of State DOCUMENT # P03000119846** 1. Entity Name 02-23-2004 90053 031 ***150.00 HANSON CONSTRUCTION, INC. Principal Place of Business Mailing Address 18 3RD STREET 18 3RD STREET **BONITA SPRINGS FL 34134 BONITA SPRINGS FL 34134** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) City & State 4. FEI Number Applied For City & State 56-2410411 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HANSON, RICHARD W Street Address (P.O. Box Number is Not Acceptable) 18 3RD STREET **BONITA SPRINGS FL 34134** Zip Code FL 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) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE **PSTD** TITLE Change ☐ Addition ☐ Delete HANSON, Richard VV HANSON, RICHARD W NAME NAME 18 3RD STREET 18 3RD STREET STREET ADDRESS STREET ADDRESS Bonita Springs, Fl. 34134 CITY-ST-ZIP **BONITA SPRINGS FL 34134** CITY-ST-ZIP v T D Change VD ☐ Addition ☐ Delete Hollands, Norman W HOLLANDS, NORMAN W NAME 18 3RD STREET 18 3RD STREET STREET ADDRESS STREET ADDRESS Bonita Springs, FL. 34134 **BONITA SPRINGS FL 34134** CITY-ST-ZIP TITLE Change ☐ Addition ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition TITE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

uchand In Hanson Richard W. Hanson Pres. 2-16-04

FILED

1-239-992-6560 Daytime Phone #