

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

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

03-02-2004 90008 016 ***150.00

DOCUMENT # P03000120293

1. Entity Name

R.D. BAKER BUILDERS, INC.



Principal Place of Business

2999 INGRESS RD
TALLAHASSEE FL 32333

Mailing Address

2999 INGRESS RD
TALLAHASSEE FL 32333

2. Principal Place of Business

2322 Enabob St

Suite, Apt. #, etc.

P.O. Box 495

City & State

Lanark Village FL

Zip

32323-0495

Country

Franklin

3. Mailing Address

2322 Enabob St

Suite, Apt. #, etc.

P.O. Box 495

City & State

Lanark Village FL

Zip

32323-0495

Country

Franklin



MOORE

CR2E034 (11/03)

4. FEI Number

20-0315260

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BAKER, ROBERT D
2999 INGRESS RD
TALLAHASSEE FL 32333

7. Name and Address of New Registered Agent

Name

Robert D. Baker

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

2322 Enabob St

City

Lanark Village

FL

Zip Code

32323

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

Robert D. Baker

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

Robert D. Baker

(NOTE: Registered Agent signature required when reinstating)

2-27-04

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	<input type="checkbox"/> Delete
NAME	BAKER, ROBERT D	
STREET ADDRESS	2999 INGRESS RD	
CITY - ST - ZIP	TALLAHASSEE FL 32333	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
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TITLE		<input type="checkbox"/> Delete
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CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: Robert D. Baker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-27-04 545-6505

850