2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 8:00 am
Secretary of State
04-25-2005 90320 009 ***150.00

DOCUMENT # P03000129622

1. Entity Name
DLJ CUSTOM CONSTRUCTION ,INC.

Principal Place of Business	Mailing Address
3329 ANADOR ST. NORTH PORT, FL 34287 US	3329 ANADOR ST. NORTH PORT, FL 34287 US

DU044392

03152005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
4781 Pocatella Ave.	4781 Pocatella Ave
Suite, Apt. #, etc. NorthPort, FL	Suite, Apt. #, etc. NorthPort, FL
City & State	City & State
Zip 34286 Country Sarasota	Zip 34286 Country Sarasota

4. FEI Number 20-0411104 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
W. R. KLEIN P.A. 1900 MAIN ST. SUITE 310 SARASOTA, FL 34236	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D ANDREWS, DAVID 3329 ANADOR ST. NORTHPORT, FL 34287	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 4781 Pocatella Ave. North Port, FL 34286
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/D ANDREWS, LISA 3329 ANADOR ST. NORTHPORT, FL 34287	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 4781 Pocatella Ave. NorthPort, FL 34286
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TR HINKLE, JOSEPH 3329 ANADOR ST. NORTHPORT, FL 34287	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 4781 Pocatella Ave. North Port, FL 34286
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: David Andrews David Andrews 4/22/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #