

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03044

FILED  
Feb 23, 2004  
Secretary of State

Entity Name: CAROTHERS CONSTRUCTION, INC.

**Current Principal Place of Business:**

HWY 7 SOUTH  
PO DRAWER 687  
WATER VALLEY, MS 389650687

**New Principal Place of Business:**

7084 CR 436  
WATER VALLEY, MS 389650687

**Current Mailing Address:**

HWY 7 SOUTH  
PO DRAWER 687  
WATER VALLEY, MS 389650687

**New Mailing Address:**

P.O. BOX 687  
WATER VALLEY, MS 389650687

FEI Number: 64-0440391

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: CAROTHERS, ARNOLD,  
Address: HWY 7 S, PO DRAWER 687  
City-St-Zip: WATER VALLEY, MS

Title: S ( ) Delete  
Name: LOGAN, BEN  
Address: P.O. DRAWER 687  
City-St-Zip: WATER VALLEY, MS 38965

Title: PT ( ) Delete  
Name: CAROTHERS, SEAN B.,  
Address: WEST LEE ST., EXTENDED  
City-St-Zip: WATER VALLEY, MS

Title: VP ( ) Delete  
Name: LOGAN, BEN  
Address: HWY 7 SOUTH P O DRAWER 687  
City-St-Zip: WATER VALLEY, MS 38965

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: CAROTHERS, ARNOLD W  
Address: 7084 CR 436, PO DRAWER 687  
City-St-Zip: WATER VALLEY, MS 38965

Title: S (X) Change ( ) Addition  
Name: LOGAN, BEN  
Address: 7084 CR 436, P.O. DRAWER 687  
City-St-Zip: WATER VALLEY, MS 38965

Title: PT (X) Change ( ) Addition  
Name: CAROTHERS, SEAN B  
Address: 7084 CR 436, P.O. BOX 687  
City-St-Zip: WATER VALLEY, MS 38965

Title: VP (X) Change ( ) Addition  
Name: LOGAN, BEN  
Address: 7084 CR 436, P.O. BOX 687  
City-St-Zip: WATER VALLEY, MS 38965

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SEAN B. CAROTHERS

PRES

02/23/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date