2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Aug 02, 2004 08:00 AM Secretary of State **DOCUMENT # P93000082144** TROVILLION CONSTRUCTION & DEVELOPMENT, INC. Principal Place of Business Mailing Address 1901 WOODWARD STREET 1901 WOODWARD STREET ORLANDO, FL 32803 ORLANDO, FL 32803 07292004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3211219 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent SIMS, LORI R CPA DO NOT WRITE 1400 WEST FAIRBANKS AVENUE STE, 102 IN THIS SPACE WINTER PARK, FL 32789 Durpose of changing its registered office or registered egent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity the obligations of register SIGNATURE. (NOTE: Registered Agent signature required when reinstating) Election Campaign Financing \$5.00 May Be in accordance with s. 607.193(2)(b), F.S., the FILE NOWIII FEE IS \$150.00 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 5, 2004 OFFICERS AND DIRECTORS 10. DILE NAME TROVILLION, DOUGLAS P 1901 WOODWARD STREET U00000169067 STREET ADDRESS ORLANDO, FL 32803 CITY-ST-ZIP 08/02/04-80008-023 150.00 me NAME STREET ADDRESS CRTY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE C(T)Y-57-73P IN THIS SPACE NAME STREET ADDRESS CITY-57-Z3P TILL NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. 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:

TITLE HAME STREET ADDRESS CRY-ST-ZP

Davrime Phone #