## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Apr 22, 2004 08:00 AM Secretary of State **DOCUMENT # P94000017645** 1. Entity Name CONSTRUCTION ASSOCIATES INTERNATIONAL, INC. Mailing Address Principal Place of Business 395 SOUTH RANGE ROAD 395 SOUTH RANGE ROAD COCOA, FL 32926 COCOA, FL 32926 No Chg-P CR2E034 (10/03) 04132004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3386302 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE WILLIS, LU ANNE 395 SOUTH RANGE ROAD COCOA, FL 32926 IN THIS SPACE 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 site if applicable U00000125172 (NOTE, Registered Agent signature required when reinstating) 04/22/04-800/4-007 150.00 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 **17** Trust Fund Contribution. Added to Fees 10. 7171.2 WILLIS, LU ANNE. NAME 395 SOUTH RANGE ROAD STREET ADDRESS C3TY - ST- 23P COCOA, FL 32926 TETLE SPEEGLE, JAMES T NAME 395 SOUTH RANGE ROAD STREET ADDRESS CITY-ST-ZIP COCOA, FL 32926 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-SY-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CRY-ST-ZIP TITLE MAME STREET ADDRESS

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. 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 ceth; 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 antachment with an address, with all other like empowered.

**SIGNATURE** 

CITY -57 - 73P TRILE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TITLED OR PRINTED HAMS OF SIGNING OFFICER OR DIRECTOR

**FILED**