## 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

ATURE AND TYPED OR PRINTED NAME OF SIG

## Apr 09, 2005 08:00 AM Secretary of State DOCUMENT # P94000072844 1. Entity Name BINDER BUILDING COMPANY, INC. Principal Place of Business Mailing Address 1155 4TH ST SOUTH NAPLES FL 34102 US 1155 4TH ST SOUTH NAPLES FL 34102 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite. Apt. #. etc. 1st MOORE CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 65-0533808 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BINDER, BURTON A Street Address (P.O. Box Number is Not Acceptable) 1155 4TH ST SOUTH NAPLES FL 34102 City Zip Code FL 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 title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ane ☐ Addition ☐ Delete ☐ Change BINDER, BURTON A. NAME STREET ADDRESS 1155 4TH ST SOUTH STREET ADDRESS NAPLES FL 34102 CITY-ST-ZIP CITY-ST-ZIP VP ☐ Addition Change 11711 Defete NAME HOBBS, JOSEPH R NAME STREET ADDRESS 1317 MILANO DRIVE STREET ADDRESS NAPLES FL 34103 CITY-ST-7/P CHY-ST-ZIP Delete Change ☐ Addition TITLE 111) F NAME BINDER, JEANNE E NAME U00000296268 04/09/05-80059-024 150.00 STREET ADDRESS 1155 4TH ST SOUTH STREET AODRESS CITY-ST-ZIP CHY-SI-ZIP NAPLES FL 34102 HHE Change Addition Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE □ □elete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P 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 any address, with all other like empowered.

FILED

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