


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90270 015 ***150.00

DOCUMENT # P95000000170	
1. Entity Name AAA GATOR CONSTRUCTION, INC.	

Principal Place of Business 1980 S FABIAN POINT LACANTO FL 34461 US	Mailing Address 1980 S FABIAN POINT LECANTO FL 34461 US
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2. Principal Place of Business 1980 S. Fabian Pt. Suite, Apt. #, etc. Lecanto, FL. City & State Lecanto, FL. Zip 34461 Country CITRUS	3. Mailing Address 1980 S. Fabian Pt. Suite, Apt. #, etc. Lecanto FL. City & State Lecanto, FL. Zip 34461 Country CITRUS
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MOORE CR2E034 (11/03)

4. FEI Number 59-3289795	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent KEMPTON, CURTIS H JR 1980 SOUTH FABIAN POINT LECANTO FL 34461	7. Name and Address of New Registered Agent Name Curtis H. Kempton Street Address (P.O. Box Number is Not Acceptable) 1980 S. Fabian Pt. City Lecanto FL Zip Code 34461
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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 NO changes (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KEMPTON, CURTIS H JR 1980 SOUTH FABIAN POINT LECANTO FL 34461 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: Curtis H. Kempton 4/26/04 352-302-0089
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #