

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 02, 2005 08:00 AM
Secretary of State

DOCUMENT # P96000014640

1. Entity Name
OSPREY-GULF SHORE BUILDING MATERIALS, INC.



Principal Place of Business
4328 DOMESTIC AVE
NAPLES, FL 34104 US

Mailing Address
8395 GARDEN ROAD
RIVIERA BEACH, FL 33404 US



01172005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0656517

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MENG, PHILIP G
8395 GARDEN RD.
RIVIERA BEACH, FL 33404

**DO NOT WRITE
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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000211896
02/03/05-80007-011 158.75

10. OFFICERS AND DIRECTORS

TITLE	DST
NAME	MENG, PHILIP G
STREET ADDRESS	8395 GARDEN RD.
CITY - ST - ZIP	RIVIERA BEACH, FL 33404
TITLE	DP
NAME	SCHOONOVER, JEFFREY
STREET ADDRESS	4328 DOMESTIC AVENUE
CITY - ST - ZIP	NAPLES, FL 34104
TITLE	DV
NAME	KIDDY, THOMAS
STREET ADDRESS	15851 CHIEF COURT
CITY - ST - ZIP	FT. MYERS, FL 33404
TITLE	DS
NAME	FERREIRA, JAMES
STREET ADDRESS	24073 PRODUCTION CIRCLE
CITY - ST - ZIP	BONITA SPRINGS, FL 34134
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-31-05 561 845 6802