

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90433 001 ***150.00

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P96000059538 1. Entity Name J.R. NICHOLS, GENERAL CONTRACTOR, INC.	
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Principal Place of Business 8143 POMPANO ST NAVARRE, FL 32566 US	Mailing Address PO BOX 6335 GULF BREEZE, FL 32561 US
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DO NOT WRITE IN THIS SPACE



04222004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3389920	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NICHOLS, JOSEPH R JR
8143 POMPANO STREET
NAARRE, FL 32566

**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, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD NICHOLS, JOSEPH R JR 8143 POMPANO ST NAVARRE, FL 32566
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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 empowers.

SIGNATURE: J.R. Nichols **4-29-04**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime phone #