

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000062006

FILED
May 23, 2004
Secretary of State

Entity Name: CROWDER BROTHERS OF NORTH LAKE LAND, INC.

Current Principal Place of Business:

6549 SOCRUM LOOP RD N
LAKE LAND, FL 33809 US

New Principal Place of Business:

Current Mailing Address:

6549 SOCRUM LOOP RD N
LAKE LAND, FL 33809 US

New Mailing Address:

FEI Number: 59-3397140

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHILLIPS, BRUCE D
2633 SOUTH FLORIDA AVENUE
LAKE LAND, FL 33803

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: PHILLIPS, BRUCE D
Address: 1115 AFTON STREET
City-St-Zip: LAKE LAND, FL

Title: D () Delete
Name: PHILLIPS, CARROLL
Address: 2315 WOODLEY AVENUE
City-St-Zip: LAKE LAND, FL 33803

Title: VPS () Delete
Name: HAYES, JIMMY L
Address: 810 WOODMONT LANE
City-St-Zip: LAKE LAND, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRUCE D. PHILLIPS

DPT

05/23/2004

Electronic Signature of Signing Officer or Director

Date