

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 18, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P96000080553**

1. Entity Name

CITRUS HILLS CONSTRUCTION COMPANY



Principal Place of Business

2444 N ESSEX AVE  
HERNANDO, FL 34442

Mailing Address

2476 N. ESSEX AVE  
HERNANDO, FL 34442



03102004 No Chg-P CR2E034 (10/03)

4. FEI Number

59-3408925

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

ABEL, ERIC D  
2476 N ESSEX AVENUE  
HERNANDO, FL 34442

**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

10. OFFICERS AND DIRECTORS

TITLE D  
NAME TAMPOSI, STEPHEN A  
STREET ADDRESS 2476 N ESSEX AVENUE  
CITY-ST-ZIP HERNANDO, FL 34442

TITLE D  
NAME NASH, Q. PETER  
STREET ADDRESS 40 TEMPEL ST.  
CITY-ST-ZIP NASHUA, NH

TITLE T  
NAME PASTOR, JOHN E  
STREET ADDRESS 2476 N ESSEX AVENUE  
CITY-ST-ZIP HERNANDO, FL 34442

TITLE P  
NAME DARIES, STANTON MICHAEL  
STREET ADDRESS 2444 N ESSEX AVE  
CITY-ST-ZIP HERNANDO, FL 34442

TITLE S  
NAME ABEL, ERIC D  
STREET ADDRESS 2476 N. ESSEX AVE  
CITY-ST-ZIP HERNANDO, FL 34442

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U000000091530  
03/18/04-80012-015 150.00

**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)(f), 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:

*Eric D. Abel*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Eric D. Abel

3/12/04

Date

352-746-6666

Daytime Phone #