## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 11, 2005 08:00 AM **Secretary of State** DOCUMENT # P96000098828 1. Entity Name D. E. BLANCO CONSTRUCTION, INC. Principal Place of Business Mailing Address 6203 S. MCINTOSH RD. 6203 S. MCINTOSH RD. SARASOTA, FL 34238 SARASOTA, FL 34238 01042005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0723417 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BLANCO, DOUGLAS E DO NOT WRITE 4863 OAK POINTE WAY SARASOTA, FL 34233 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) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 **\$5.00** May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME BLANCO, DOUGLAS E STREET ADDRESS 4863 OAK PT WAY U00000177587 --01/11/05-80053-016 150.00 CITY-ST-ZIP SARASOTA, FL VΡ TITLE BLANCO, DEBORAH A NAME STREET ADDRESS 4863 OAK PTWAY CITY-ST-ZIP SARASOTA, FL TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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: >

TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TIPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR