2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000099704

32531 TRILBY RD.

DADE CITY, FL 33523

Address:

City-St-Zip:

Entity Name: CASCADE CONSTRUCTION INCORPORATED

FILED Jan 05, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: P.O. BOX 1295 32531 TRILBY RD DADE CITY, FL 335261295 DADE CITY, FL 33523 **Current Mailing Address: New Mailing Address:** P.O. BOX 1295 P.O. BOX 1275 DADE CITY, FL 335261295 DADE CITY, FL 335261275 FEI Number: 59-3426242 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SHURDEN, WALTER B ESQ. 611 DRUID ROAD EAST SUITE 512 CLEARWATER, FL 33756 US 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition SANCHEZ, SONIA Name: Name: 32531 TRILBY RD. Address: Address: City-St-Zip: DADE CITY, FL 33523 City-St-Zip: () Delete Title: ٧S Title: () Change () Addition Name: SANCHEZ, PHILLIP N 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: SONIA SANCHEZ P 01/05/2004