


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 31, 2005 8:00 am
Secretary of State

03-31-2005 90048 008 ***150.00

DOCUMENT # P96000102760 1. Entity Name CORNERSTONE CONSTRUCTION OF PINELLAS, INC.	
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Principal Place of Business 1107 SUNSET RIDGE LANE TARPON SPRING, FL 34689	Mailing Address 1107 SUNSET RIDGE LANE TARPON SPRING, FL 34689
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DO NOT WRITE IN THIS SPACE



03122005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3414246	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent GEORGAKAKIS, NICK 1107 SUNSET RIDGE LANE TARPON SPRING, FL 34689

6. 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 <u>NICK GEORGAKAKIS</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>	<u>NICK GEORGAKAKIS</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>	<u>3/28/05</u> <small>DATE</small>

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS GEORAKAKIS, EVELYN 1107 SUNSET RIDGE LANE TARPON SPRING, FL 34689
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GEORGAKAKIS, NICK 1107 SUNSET RIDGE LANE TARPON SPRING, FL 34689
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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: <u>Evelyn Georgakakis</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<u>3/28/05</u> <small>Date</small>	<u>227-943-9510</u> <small>Daytime Phone #</small>