

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000064241

FILED  
Jul 14, 2004  
Secretary of State

Entity Name: MASTER BUILT, INC.

## Current Principal Place of Business:

3240 GALLOWAY RD.  
LAKELAND, FL 33810

## New Principal Place of Business:

## Current Mailing Address:

3240 GALLOWAY RD.  
LAKELAND, FL 33810

## New Mailing Address:

FEI Number: 59-3459188

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GOLDSMITH, JOE C  
3240 GALLOWAY RD.  
LAKELAND, FL 33810 US

## 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: PD ( ) Delete  
Name: GOLDSMITH, JOE C  
Address: 3240 GALLOWAY RD.  
City-St-Zip: LAKELAND, FL 33810

Title: VD ( ) Delete  
Name: JENKINS, WAYNE  
Address: 3240 GALLOWAY RD  
City-St-Zip: LAKELAND, FL 33810

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S T ( ) Change (X) Addition  
Name: GOLDSMITH, CINDY T  
Address: 3240 GALLOWAY RD  
City-St-Zip: LAKELAND, FL 33810

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: JOE C GOLDSMITH

PD

07/14/2004

Electronic Signature of Signing Officer or Director

Date