


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000017743 1. Entity Name NELSON'S LARK PORTABLE BUILDINGS, INC.	
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Principal Place of Business 4505 NW 13TH ST GAINESVILLE, FL 32609-1728	Mailing Address 4505 NW 13TH ST GAINESVILLE, FL 32609-1728
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DO NOT WRITE IN THIS SPACE



01122004 No Chg-P CR2EQ34 (10/03)

4. FEI Number 59-3506014	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**NELSON, XENE
8316 NW 2ND PLACE
GAINESVILLE, FL 32607**

**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. <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	P NELSON, RICHARD 8316 NW 2ND PLACE GAINESVILLE, FL 32607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S NELSON, XENE 8316 NW 2ND PLACE GAINESVILLE, FL 32607
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01/16/04-80024-012 150.00

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: Xene Nelson Xene Nelson 1/15/04 352-374-7765
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #