2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000046076

1. Entity Name

EBBTIDE CONSTRUCTION & DEVELOPMENT, INC.



FILED Feb 28, 2004 08:00 AM Secretary of State

Principal Place of Business

10624 LAKE MINNEOLA SHORES CLERMONT, FL 34711

Mailing Address

10624 LAKE MINNEOLA SHORES CLERMONT, FL 34711



DO NOT WRITE IN THIS SPACE

02032004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3585701 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

			Registered	

CHECHO, ROBERT 10624 LAKE MINNEOLA SHORES CLERMONT, FL 34711

DO NOT WRITE IN THIS SPACE

The above named entity submits this statement for the the obligations of registered agent.		ed office or registered agent, or both,	in the State of Florida. I am familiar with, and accept
SIGNATURE	if applicable. (NOTE, Registered	Agent signature regulied when religiously	DAIE
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Finan Trust Fund Contribution.	cing \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRE			
TITLE D NAME CHECHO, ROBERT STREET ADDRESS 10624 LAKE MINNEOLA SHORES CITY-ST-ZIP CLERMONT, FL 34711			
TIYLE NAME STREET ADDRESS CITY-ST-ZIP		0:	U00000069862 3/01/04-80026-006 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO I	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN T	HIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	4		
12 I hereby certify that the information supplied with this	filing does not qualify for the exer	motion stated in Section 119 07(3Vi)	

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 addition, with all giver like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-23-04 3513941850