2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2004
Secretary of State

DOCUMENT# P99000077588

Entity Name: PROFESSIONAL CONTRACTORS & ENGINEERS, INC.

Current Principal Place of Business:

26530 MALLARD WAY
STE A
PUNTA GORDA, FL 33950

New Principal Place of Business:

Current Mailing Address:

PO BOX 7509
COLUMBIA, MO 65205

New Mailing Address:

FEI Number: 65-0946929 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOORE, JAMES E III
1625 WEST MARION AVENUE, SUITE 2
PUNTA GORDA, FL 33950 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SIMON, W. CRAIG
Address: 5900-C NORTH TOWER DRIVE
City-St-Zip: COLUMBIA, MO 65202

Title: D ( ) Delete
Name: BEVERLY, JULIAN T
Address: 1480 NARRANJA ST.
City-St-Zip: PUNTA GORDA, FL 33950

Title: D (X) Delete
Name: LEGRAND, ALBERT W
Address: 4093 DRANCE ST
City-St-Zip: CHARLOTTE HARBOR, FL 33980

Title: D (X) Delete
Name: LABOUSIER, LINDA C
Address: 1236 LYLE ST
City-St-Zip: PORT CHARLOTTE, FL 33952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: ( ) Change ( ) Addition
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: W. CRAIG SIMON D 02/17/2004

Electronic Signature of Signing Officer or Director — Date