
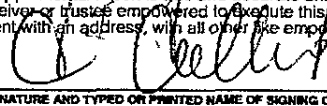


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 14, 2004 08:00 AM
Secretary of State

DOCUMENT # P99000101747 1. Entity Name TALBERT CONSTRUCTION COMPANY, INC.			
Principal Place of Business 9434 AEGEAN DR BOCA RATON, FL 33496		Mailing Address 9434 AEGEAN DR BOCA RATON, FL 33496	
DO NOT WRITE IN THIS SPACE		 07082004 No Chg-P CR2E034 (10/03)	
4. FEI Number 65-0380972		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent TALBERT, TIMOHTY 9434 AEGEAN DRIVE BOCA RATON, FL 33496		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			
TITLE	D	DO NOT WRITE IN THIS SPACE	
NAME	TALBERT, TIMOTHY M		
STREET ADDRESS	9434 AEGEAN DRIVE		
CITY-ST-ZIP	BOCA RATON, FL 33496		
TITLE	D		
NAME	TALBERT, JAMES T JR		
STREET ADDRESS	2098 LAKE MARION DRIVE	DO NOT WRITE IN THIS SPACE	
CITY-ST-ZIP	APOPKA, FL 33270		
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		DO NOT WRITE IN THIS SPACE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS		DO NOT WRITE IN THIS SPACE	
CITY-ST-ZIP			
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: 		Timothy M Talbert 7-12-04 561-477-034	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	