

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S23528

FILED  
Apr 23, 2004  
Secretary of State

Entity Name: REBAR SYSTEMS SERVICE, INC.

**Current Principal Place of Business:**

130 PINEY ROAD  
COTUIT, MA 02635 US

**New Principal Place of Business:**

**Current Mailing Address:**

BOX 2046  
130 PINEY ROAD  
COTUIT, MA 02635 US

**New Mailing Address:**

FEI Number: 04-2776696      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GOODMAN, KENNETH D.  
3838 TAMIAMI TRAIL N  
STE 300  
NAPLES, FL 34103

**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: WHRITENOUR, PHILLIP, A.  
Address: 130 PINEY ROAD  
City-St-Zip: COTUIT, MA

Title: DVT ( ) Delete  
Name: BLACK, PETER,  
Address: 439 TERHUNE ROAD  
City-St-Zip: PRINCETON, NEW JER.,

Title: S ( ) Delete  
Name: WHRITNEOUR, BETTY LO, U  
Address: 130 PINEY ROAD  
City-St-Zip: COTUIT, MA

Title: P ( ) Delete  
Name: BLACK, PETRE  
Address: 439 TERHUNE ROAD  
City-St-Zip: PRINCETON, NJ

**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: PHILLIP A. WHRITENOUR

DIR

04/23/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date