


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2004 08:00 AM
Secretary of State

DOCUMENT # S25617 1. Entity Name OCEAN CONSTRUCTION, INC.	
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Principal Place of Business 5811 HALIFAX AVENUE FORT MYERS, FL 33912 US	Mailing Address 5811 HALIFAX AVENUE FORT MYERS, FL 33912 US
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DO NOT WRITE IN THIS SPACE



01122004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0243910	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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5. Name and Address of Current Registered Agent

COSTELLO, TRUMAN J.
 12670 NEW BRITTANY BLVD.
 #101
 FT. MYERS, FL 33907

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 _____ (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. **\$5.00** May Be Added to Fees

UN0000031986
 02/04/04-80170-023 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SASSER, DAVID L. 17541 OAK CREEK RD ALVA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V STONE, JOHN 11600 SHIRLEY LANE FORT MYERS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SASSER, WILLIAM 11619 RANCHETE ROAD FORT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SASSER, CHRISTINE M 11619 RANCHETTE RD. FORT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Christine M Sasser Date: 1/29/04 Daytime Phone #: 239-590-6161