


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 08, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # S52207</b>	
1. Entity Name ALAPAHA CONSTRUCTION, INC.	

Principal Place of Business 1625 NW 86TH BLVD JASPER, FL 32052 US	Mailing Address P.O BOX 76 JENNINGS, FL 32053 US
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01062004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3065980	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  ANTHONY TODD LAW 1625 NW 86TH BLVD JASPER, FL 32052
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**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**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD LAW, CHARLTON, JR. 3987 NW 63RD AVE JENNINGS, FL 32053
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD NEWSOME, A.C., JR. 2672 KIM AVE VALDOSTA, GA 31601
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD LAW, ANTHONY TODD 1625 NW 86TH BLVD JASPER, FL 32052
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**DO NOT WRITE  
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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)(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:** Anthony Todd Law, ANTHONY Todd LAW 1/06/2004 386/938-5200  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #