

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V24698

FILED
Jan 10, 2004
Secretary of State

Entity Name: MIKES EXCAVATING AND LANDSCAPING, INC.

Current Principal Place of Business:

1403 TEMPLEMORE DR
CANTONMENT, FL 32533

New Principal Place of Business:

Current Mailing Address:

PO BOX 7227
PENSACOLA, FL 325340227

New Mailing Address:

FEI Number: 59-3117871

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARTER, MICHAEL A.
1403 TEMPLEMORE DR
CANTONMENT, FL 32533

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: CARTER, MICHAEL A.,
Address: PO BOX 7227
City-St-Zip: PENSACOLA, FL 32534

Title: D () Delete
Name: CARTER, LORI S.,
Address: PO BOX 7227
City-St-Zip: PENSACOLA, FL 32534

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CARTER, MICHAEL A.,
Address: PO BOX 7227
City-St-Zip: PENSACOLA, FL 32534

Title: SEC (X) Change () Addition
Name: CARTER, LORI S.,
Address: PO BOX 7227
City-St-Zip: PENSACOLA, FL 32534

Title: VP () Change (X) Addition
Name: CARTER, JOSEPH
Address: 24 A CHAUNCEY STREET
City-St-Zip: PENSACOLA, FL 32534

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: LORI S. CARTER

SECR

01/10/2004

Electronic Signature of Signing Officer or Director

Date