2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # V48433

1. Entity Name

ODUM CONSTRUCTION CO. OF PALM BEACHES, INC.



FILED Jan 30, 2004 08:00 AM Secretary of State

Principal Place of Business

4152 W. BLUE HERON BLVD

115

RIVIERA BEACH, FL 33404

He

Mailing Address

4152 W. BLUE HERON BLVD

115

DO NOT WRITE IN THIS SPACE

RIVIERA BEACH, FL 33404

No Chg-P

g-P C

CR2E034 (10/03)

4. FEI Number 65-0346715

01262004

Applied For Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ODUM, MICHAEL J. 4152 W. BLUE HERON BLVD 115

DO NOT WRITE IN THIS SPACE

RIVIERA BEACH, FL 33404			IN THIS SPACE	
	named entity submits this statement for the ptions of registered agent.	ourpose of changing its registered office	or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	if applicable. (NOTE, Registered Agent sig	nature required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ODUM, KEVIN L 4152 W. BLUE HERON BLVD # 115 RIVIERA BEACH, FL 33404	CTORS		Unnnonn21536
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ODUM, MICHAEL J. 4152 W. BLUE HERON BLVD # 115 RIVIERA BEACH, FL 33404			U00000021536 01/30/04-80008-017 158.75
TITLE NAME STREET ADDRESS CITY+ST-ZIP				NOT WRITE
TITLE			INI "	THIS SPACE

12. I hereby certify that the information supplied with this illing 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 the 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 in the end to execut 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 add of the information of the corporation of the corporation of the corporation of the receiver.

Michael J. ODUM

SIGNATURE:

STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/26/04 (561)841-9877