FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 366344

(0)

R. O. CAMP CONSTRUCTION, INC.

1	HLLL)
Apr 23	1998	8:00am
Secre	tary o	f State



1. 10 AS 352 372-3702

Principal Place	e of Business	Mailing Address			A SOCIOR DIGITA OLISO DISTI DIDIL QUAL DIRIL	BIERI DIDII BIBIR BIBIR BIBIR IBBI
1001 N.E. WALDO RD 1001 N.E. WALDO RD P.O. BOX 686 P.O. BOX 686 GAINESVILLE FL 32602 GAINESVILLE FL 32602				DO NOT WRITE IN THIS SPACE		
		i			3. Date Incorporated or Qualified	
					06/29/1970	
	ace of Business	2a, Mailing Address		•	4. FEI Number	Applied For
21 Cuite Ani	# ata	Suite, Apt. #, etc.			59-1306428	Not Applicable
Suite, Apt.		27			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	6	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Coun	try	8. This corporation owes or has paid the	
24	25	29	30		Personal Property Tax due June 30.	res □ No
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Register	ed Agent
	MP, ROY O.		[1	81 Name	•	
)1 n.e. waldo RD Inesville Fl 32602		Ī	Street Add	Iress (P.O. Box Number is Not Acceptable)	
			Ī	33		
			1	34 City		85 Zip Code
						L 65 215 COOC
office or r	to the provisions of Sections 607.0 egistered agent, or both, in the Stam m familiar with, and accept the ob	ite of Florida. Such change was	authorized	by the corpora	poration submits this statement for the purpos tion's board of directors. If hereby accept the a	e of changing its registered appointment as registered
SIGNATURE	Signature, typed or printed name of registered	arrent and fille if another this (NC)	III - Fledislated	Agent signature regu	ired when reinstating) DAT	<u> </u>
12.	- 	ND DIRECTORS	13.	House	ADDITIONS/CHANGES TO OFFICERS	
TITLE	SDT	DELETE	1.1 TITL	E		Change Addition
NAME	CAMP, BEVERLY L		1.2 NAM	AE)]
STREET ADDRESS	4304 N W 78 TERR		1.3 STR	EET ADDRESS		
CITY-ST-ZIP	GAINESVILLE FL		1.4 C(1)	r-ST-ZIP		
TITLE	PD	DELETE	2.1 TITL	E		Change Addition
NAME	CAMP, ROY O		2.2 NAN	ME (
. STREET ADDRESS	4304 N W 78 TERR		2.3 STR	EET ADDRESS		
CITY-ST-ZIP	GAINESVILLE FL		2. 4 CIT	Y-ST-ZIP		
TITLE	VD	DELETE	3.1 TITL	£	•	Change Addition
NAME	FILLMER, TOMMY D.		3.2 NAM	lE [•	
STREET ADDRESS	4408 NW 78TH TERR		3 3 STA	eet address		ļ
CITY-ST-ZIP	GAINESVILLE FL	····		Y-ST-ZIP		
TITLE		☐ DELETE	4.1 TITL	E		Change Addition
NAME			4. 2 NA	ME		
STREET ADDRESS			4.3 STR	EET ADDRESS		
CITY-ST-ZIP				r-\$1-ZIP		
TITLE		DELETE	5 1 TITE		•	Change Addition
NAME		•	5.2 NAN	Į		ĺ
STREET ADDRESS			5.3 STR	EET ADDRESS		
CITY-ST-ZIP				r-ST-ZIP		
TITLE		☐ DELETE	6.1 TITL	- 1		Change Addition
NAME			6.2 NAM	IE		
STREET ADDRESS			6.3 STR	EET ADDRESS		Ì
CITY-ST-ZIP			64 CITY	-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

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