

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 11, 1999 8:00 am
Secretary of State

03-11-1999 90060 010 ***150.00

0058875

DOCUMENT # 403089

1. Corporation Name

CENTRAL CONSTRUCTION CORPORATION

Principal Place of Business

1431 7TH ST.
SAWANEE AVE
SOUTHPORT FL 32409
US

Mailing Address

P O BOX 8337
SAWANEE AVE
SOUTHPORT FL 32409-8337

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/14/1972

4. FEI Number

59-1412959

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

**NEWELL, JESSE A.
1431 7TH ST
SOUTHPORT FL 32409**

10. Name and Address of New Registered Agent

81 Name

Kenneth A. Newell

82 Street Address (P.O. Box Number is Not Acceptable)

1431 7th street

83

84 City

Southport,

FL

85 Zip Code
32409

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE **Kenneth A. Newell** **Kenneth A. Newell**

3/8/99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☒ DELETE
NAME **NEWELL, JESSE A**
STREET ADDRESS **1431 7TH STREET, P.O. BOX 8337**
CITY-ST-ZIP **SOUTHPORT FL**

TITLE **DS** ☐ DELETE
NAME **NEWELL, KATHRYN**
STREET ADDRESS **1431 7TH STREET, P.O. BOX 8337**
CITY-ST-ZIP **SOUTHPORT FL**

TITLE **V** ☒ DELETE
NAME **NEWELL, KENNETH**
STREET ADDRESS **9832 MORAR ROAD**
CITY-ST-ZIP **SOUTHPORT FL**

TITLE **V** ☐ DELETE
NAME **NEWELL, JEFFERY A.**
STREET ADDRESS **7608 HWY 2302**
CITY-ST-ZIP **SOUTHPORT FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PD** ☒ Change ☐ Addition
1.2 NAME **Kenneth A. Newell**
1.3 STREET ADDRESS **1431 7th Street**
1.4 CITY-ST-ZIP **Southport, Florida 32409**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME **Asst. V**
5.3 STREET ADDRESS **Jesse R. Newell**
5.4 CITY-ST-ZIP **1431 7th Street Southport, Fla. 32409**

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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, with all other like empowered.

SIGNATURE: **Kathryn Newell** **Kathryn Newell**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/8/99

Date

850-265-5733

Daytime Phone #

CR2E034 (11/98)