

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

FILED
May 06 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 680441 (3)

1. Corporation Name
RUNK CONSTRUCTION COMPANY



Principal Place of Business 180 S R 207 C/O ARTHUR H. RUNK, JR. ST. AUGUSTINE FL 32086 US	Mailing Address 180 S R 207 C/O ARTHUR H. RUNK, JR. ST. AUGUSTINE FL 32086 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 RUNK CONSTRUCTION CO Suite, Apt. #, etc 22 1985 MIZELL Rd City & State 23 ST. AUGUSTINE FL Zip 24 32084 Country 25 USA	2a. Mailing Address 26 RUNK CONSTRUCTION CO Suite, Apt. #, etc. 27 1985 MIZELL Rd. City & State 28 ST. AUGUSTINE FL Zip 29 32084 Country 30 USA
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3. Date Incorporated or Qualified 07/31/1980	4. FEI Number 59-2016298	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

RUNK, ARTHUR H., JR
180 STATE ROAD 207
ST. AUGUSTINE, FL EF 32086

10. Name and Address of New Registered Agent

81 Name RUNK, ARTHUR H., JR.
82 Street Address (P.O. Box Number is Not Acceptable) 1985 MIZELL Rd.
83
84 City ST. AUGUSTINE FL
85 Zip Code 32084

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 *Arthur H. Runk Jr.* **Arthur H. Runk Jr., 4-15-98**
Signature, typed or printed name of registered agent (if applicable) (NOT Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RUNK, ARTHUR H., JR. 235 S MATANZAS BLVD ST AUGUSTINE, FL 00000	<input type="checkbox"/> DELETE <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RUNK, CHRISTOPHER 9 VERSAGGI DR. ST. AUGUSTINE FL	<input type="checkbox"/> DELETE <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD RUNK, PAUL B 34 REDWING LANE ST. AUGUSTINE FL	<input type="checkbox"/> DELETE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE <input type="checkbox"/> Change <input type="checkbox"/> Addition

1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP	32084	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE		
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP	32084	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	344 REDWING LANE	
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP	32084	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE		
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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.

SIGNATURE: *Arthur H. Runk Jr.* **ARTHUR H. RUNK JR. 4-15-98 004 471-8272**

CR2E034 (10/97)