

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
**1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

95 MAY -1 AM 3:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **F31857** (8)  
1. Corporation Name  
**DAVE SHIRK CONSTRUCTION, INC.**

Principal Place of Business Mailing Address  
**P. O. BOX 5126** **P. O. BOX 5126**  
**PO BOX 5126** **PO BOX 5126**  
**SARASOTA FL 34277** **SARASOTA FL 34277**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>04/22/1981</b>		3a. Date of Last Report <b>06/01/1994</b>	
4. FEI Number <b>59-2084185</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

21. Principal Place of Business	2a. Mailing Address
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.
23. City & State	28. City & State
24. ZIP	29. ZIP
25. Country	30. Country

9. Name and Address of Current Registered Agent

**SHIRK, DAVID M**  
**2492 WATERVIEW COURT**  
**SARASOTA FL 34231**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Numbers Not Acceptable)

83.

84. City **FL** 85. Zip Code

11. Pursuant to the provisions of sections 607.01501 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 607.0203, Florida Statutes.

SIGNATURE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	<b>PVD</b>
NAME	<b>SHIRK, DAVID M</b>
STREET ADDRESS	<b>2492 WATERVIEW COURT</b>
CITY, ST, ZIP	<b>SARASOTA, FL 00000</b>
TITLE	<b>STD</b>
NAME	<b>SHIRK, LAURA J</b>
STREET ADDRESS	<b>2492 WATERVIEW COURT</b>
CITY, ST, ZIP	<b>SARASOTA, FL 00000</b>
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS, IN:  Change  Addition

1. TITLE	
1. NAME	
1. STREET ADDRESS	
1. CITY, ST, ZIP	
2. TITLE	
2. NAME	
2. STREET ADDRESS	
2. CITY, ST, ZIP	
3. TITLE	
3. NAME	
3. STREET ADDRESS	
3. CITY, ST, ZIP	
4. TITLE	
4. NAME	
4. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	
5. NAME	
5. STREET ADDRESS	
5. CITY, ST, ZIP	
6. TITLE	
6. NAME	
6. STREET ADDRESS	
6. CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.02(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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 on Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE: *Laura J. Shirk Sec. Laura J. Shirk* 4/30/95 813/955-4364  
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date