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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **G02768** **(1)**

1. Corporation Name
FORSBERG CONSTRUCTION, INC.

Principal Place of Business
6475 GOLF COURSE BLVD.
PUNTA GORDA FL 33982

Mailing Address
6475 GOLF COURSE BLVD.
PUNTA GORDA FL 33982-1810

3. Date Incorporated or Qualified: 09/29/1982
3a. Date of Last Report: 06/03/1996

2. Principal Place of Business
21
Suite, Apt. #, etc
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc
27
City & State
28
Zip 29 Country 30

4. FEI Number: 59-2223536 ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
WENDORF, RICHARD L.
181 ALBERT LANE
PT. CHARLOTTE FL 33952

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 173 Albert Lane (Address change only)
84 City: Pt. Charlotte FL 85 Zip Code: 33954

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 I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE
Signature of Registered Agent (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: DST	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME: JUDSON, RONALD E		1.2 NAME	
STREET ADDRESS: 1732 E. DEXTER TRAIL		1.3 STREET ADDRESS	
CITY-ST-ZIP: DANSVILLE MI 48819		1.4 CITY-ST-ZIP	
TITLE: DP	☐ DELETE	2.1 TITLE	☒ Change ☐ Addition
NAME: WENDORF, RICHARD L		2.2 NAME	
STREET ADDRESS: 181 ALBERT LANE		2.3 STREET ADDRESS	173 Albert Lane
CITY-ST-ZIP: PT. CHARLOTTE FL 33952		2.4 CITY-ST-ZIP	Pt. Charlotte, Fl. 33954
TITLE: DC	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME: FORSBERG, T A		3.2 NAME	
STREET ADDRESS: 1102 BONANZA DR		3.3 STREET ADDRESS	
CITY-ST-ZIP: OKEMOS MI 48865		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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: Richard L. Wendorf — Richard L. Wendorf — March 11, 1997 — 941-637-8500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (9/96)