1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G50153

1. Corporation Name

VILLAGE CONSTRUCTION OF N.W. FLORIDA, INC.

Principal Place of Business Mailing Address)(1 B1011 (BB1
532 MILESTONE BLVD		P.O. BOX 37747					
CANTONMENT FL 32533		PENSACOLA FL 32526-0747		DO NOT WRITE IN T	HIC COACE		
us		US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed		
					07/18/1983		
2. Principal Place of Business		2a. Mailing Address			4. FEI Number		olied For
		26			59-2462744		Applicable _
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 A		
22		27			Fee Red		
City & State		City & State		6. Election Campaign Financing	\$5.00 h		
23		28		Trust Fund Contribution	Added to) Fees	
Zip	Country Zip		Country	′	8. This corporation owes the current year		□No
24	25		30		Personal Property Tax. 10. Name and Address of New Register		
	9. Name and Address of Curre	nt Registered Agent	81	Name	10. Name and Address of New Register	ed Agent	
THE	BEVERLY		١٠.	Name			
	ALAKAI DR.		82	Street Add	ress (P.O. Box Number is Not Acceptable)		
PENSACOLA FL 32526			83				
ı cı	SACOLA I E GEGEO		83				
			84	City	, <u> </u>	85 Zip C	ode
office or n agent. I a	m familiar with, and accept the oblig	ations or, Section 607.0505, Flor	ida Statutes	.	poration submits this statement for the purpose on's board of directors. I hereby accept the appearance of the purpose of when reinstating).		jistered
	Signature, typed or printed name of registered ag-		Registered Age	nt signature require	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS		RS IN 12
12.	PSD OFFICERS A	ND DIRECTORS	1.1 TITLE		ADDITIONS/BITANCES TO OT TICENCE	☐ Change	Addition
TITLE	TILL, GREGORY E.		1.2 NAME				•
NAME	SOO LINE SOTONE DI VID			TADDRESS			ļ
STREET ADDRESS	CANTONMENT FL			į			
CITY-ST-ZIP	CANTONMENT FL	DELETE	1.4 CITY-S 2.1 TITLE	31-ZIP		Change	Addition
TITLE			2.2 NAME				_
NAME				TADORESS			
STREET ADDRESS				1			
CITY-ST-ZIP		☐ DELETE	2. 4 CITY-5 3.1 TITLE	SI-ZIP		[] Change	Addition
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NAME			3.2 NAME		The state of the s		ļ
STREET ADDRESS				TADORESS	<u>.</u>		
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TITLE							
NAME			4, 2 NAME				
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP		☐ DELETE	4.4 CITY-5	SI-ZIP	market but a first and a first	Change >	- Addition
TITLE		□ Derese	5.1 IFILE 5.2 NAME			Change	
NAME				T ADDRESS	12 (15) 12 (15) 12 (15) 13 (15) 14 (15) 14 (15) 15 (15) 15 (15) 15 (15) 15 (15) 15 (15) 15 (15) 15 (15) 15 (15	和的歌曲的	J. 32. 32
STREET ADDRESS	I		0.0 0 INCE	DDITEGG			

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.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE: X

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ DELETE

Change

Addition

Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90015 031 ***150.00