PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCIMENT

 Corporation 	O COBB CONSTRUCTION							
Principal Place of Business Mailing Address						I (BBILID BILD BILD LIBIN IBIN IBIN IBIN IBIN	1 91611 31811 81811 0	.1811 #1811 1881
1029 W TOWNSEND ST 1780 S. SAPPHIRE RD AVON PARK FL 33825 AVON PARK FL 33825						DO NOT WRITE IN TH	IS SPACE	
US	•	US				3. Date Incorporated or Qualifed 03/06/1987	0.702	
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number 59-2774711	Not	plied For t Applicable
- Suite, Apt.	#, etc:	Suite, Apt. #, etc.		,	· - ·	5. Certificate of Status Desired	\$8.75 A Fee Re	
City & Stat	e	City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year	Intangible	
24	25	29	30			Personal Property Tax.		□No
	9. Name and Address of Curr		1	Γ		10. Name and Address of New Registere	d Agent	
			•	81	Name			
	ORSI, ATHONY A. OUTH LAKE AVENUE		٠	82	Street Add	Iress (P.O. Box Number is Not Acceptable)		
P.O. BOX 1880				83				
AVON PARK FL 33825						71-17-4		
				84	City	F	85 Zip C	Jode
office or r	to the provisions of Sections 607.0 egistered agent, or both, in the Sta familiar with, and accept the obli Signature, typed or printed name of registered a	te of Florida. Such change wa gations of, Section 607.0505,	as authorized Florida Statu	ites.	the corporati	poration submits this statement for the purpose ion's board of directors. I hereby accept the appearance of the purpose of when reinstating) DATE	or changing its nointment as rec	gistered
12.		AND DIRECTORS	13.	Ayen	i signature requir	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	PST	DELETE		LE.		7.0311.010.07.01.020.7.0	Change	Addition
	COBB, HOWARD L.		1.2 NA		Ì		_ •	
NAME	506 BELL STREET				ADDRESS			
STREET ADDRESS	AVON PARK FL		1.4 CT					ł
CITY-ST-ZIP	VD	☐ DELETE				——————————————————————————————————————	☐ Change	Addition
NAME	COBB, HOWARD L.		2.2 NA		ĺ			_
STREET ADDRESS	506 BELL STREET				ADDRESS		• •	1
CITY-ST-ZIP	AVON PARK FL	tan ne ya mininga en	2.4 CI			The same of the sa		4 .
TITLE		☐ DELETE					Change	☐ Addition
NAME			3.2 NA	ME	{	• •		
STREET ADDRESS			3.3 ST	REET	ADDRESS			
CITY-ST-ZIP			3.4. CI	TY-S1	T-ZIP			
TITLE		☐ DELETE	4.1 TI	ΠE			☐ Change	☐ Addition
NAME			4. 2 N	AME				
STREET ADDRESS	,		4.3 ST	REET	ADDRESS	•		ļ
CITY-ST-ZIP			4.4 CT	TY-ST	-ZIP	·		
TITLE	,	☐ DELETE					· Change	Addition
NAME			5.2 NA		}			
STREET ADDRESS			5.3 ST	REET	ADDRESS	•		
CITY-ST-ZIP		· — — — — — — — — — — — — — — — — — — —	5.4 CF		r-zip			
TITLE		☐ DELETE					Change	☐ Addition
NAME	, ·		6.2 NA	ME				ł

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE: Howa police bh

STREET ADDRESS

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90100 006 ***150.00