

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **J72996**

(8)

GIBBCO CONST., INC.

FILED
Mar 19 1997 8:00am
Secretary of State



Principal Place of Business

Mailing Address

3212 PINE TREE DR.
EDGEWATER FL 32141

3212 PINE TREE DR.
EDGEWATER FL 32141-6614

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

22 City & State

23 Zip Country

24

26 State, Apt. #, etc.

27 City & State

28 Zip Country

29

30

9. Name and Address of Current Registered Agent

GIBBINS, WALTER A.
3212 PINE TREE DRIVE
EDGEWATER FL 32141

3. Date Incorporated or Qualified

05/15/1987

3a. Date of Last Report

04/23/1996

4. FEI Number

59-2810814

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 understand with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(If signed by a person other than a duly appointed agent and not applicable)

(If not applicable, registered agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

12.1	NAME	P	☐ DELETE
12.2	STREET ADDRESS	GIBBINS, WALTER A.	
12.3	CITY-STATE-ZIP	3212 PINE TREE DRIVE	
12.4	TITLE	EDGEWATER FL	
12.5	NAME	VP	☐ DELETE
12.6	STREET ADDRESS	STONE, RICHARD D	
12.7	CITY-STATE-ZIP	455 LAZY-Z-LANE	
12.8	TITLE	OAK HILL FL	☐ DELETE
12.9	NAME		
12.10	STREET ADDRESS		
12.11	CITY-STATE-ZIP		
12.12	TITLE		☐ DELETE
12.13	NAME		
12.14	STREET ADDRESS		
12.15	CITY-STATE-ZIP		
12.16	TITLE		☐ DELETE
12.17	NAME		
12.18	STREET ADDRESS		
12.19	CITY-STATE-ZIP		
12.20	TITLE		☐ DELETE
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12.23	CITY-STATE-ZIP		
12.24	TITLE		☐ DELETE
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12.27	CITY-STATE-ZIP		
12.28	TITLE		☐ DELETE
12.29	NAME		
12.30	STREET ADDRESS		
12.31	CITY-STATE-ZIP		
12.32	TITLE		☐ DELETE
12.33	NAME		
12.34	STREET ADDRESS		
12.35	CITY-STATE-ZIP		
12.36	TITLE		☐ DELETE
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12.39	CITY-STATE-ZIP		
12.40	TITLE		☐ DELETE
12.41	NAME		
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12.44	TITLE		☐ DELETE
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12.84	TITLE		☐ DELETE
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12.86	STREET ADDRESS		
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12.88	TITLE		☐ DELETE
12.89	NAME		
12.90	STREET ADDRESS		
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12.92	TITLE		☐ DELETE
12.93	NAME		
12.94	STREET ADDRESS		
12.95	CITY-STATE-ZIP		
12.96	TITLE		☐ DELETE
12.97	NAME		
12.98	STREET ADDRESS		
12.99	CITY-STATE-ZIP		
12.100	TITLE		☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1	TITLE	☐ Change ☐ Addition
13.2	NAME	
13.3	STREET ADDRESS	
13.4	CITY-STATE-ZIP	☐ Change ☐ Addition
13.5	TITLE	
13.6	NAME	
13.7	STREET ADDRESS	
13.8	CITY-STATE-ZIP	☐ Change ☐ Addition
13.9	TITLE	
13.10	NAME	
13.11	STREET ADDRESS	
13.12	CITY-STATE-ZIP	☐ Change ☐ Addition
13.13	TITLE	
13.14	NAME	
13.15	STREET ADDRESS	
13.16	CITY-STATE-ZIP	☐ Change ☐ Addition
13.17	TITLE	
13.18	NAME	
13.19	STREET ADDRESS	
13.20	CITY-STATE-ZIP	☐ Change ☐ Addition
13.21	TITLE	
13.22	NAME	
13.23	STREET ADDRESS	
13.24	CITY-STATE-ZIP	☐ Change ☐ Addition
13.25	TITLE	
13.26	NAME	
13.27	STREET ADDRESS	
13.28	CITY-STATE-ZIP	☐ Change ☐ Addition
13.29	TITLE	
13.30	NAME	
13.31	STREET ADDRESS	
13.32	CITY-STATE-ZIP	☐ Change ☐ Addition
13.33	TITLE	
13.34	NAME	
13.35	STREET ADDRESS	
13.36	CITY-STATE-ZIP	☐ Change ☐ Addition
13.37	TITLE	
13.38	NAME	
13.39	STREET ADDRESS	
13.40	CITY-STATE-ZIP	☐ Change ☐ Addition
13.41	TITLE	
13.42	NAME	
13.43	STREET ADDRESS	
13.44	CITY-STATE-ZIP	☐ Change ☐ Addition
13.45	TITLE	
13.46	NAME	
13.47	STREET ADDRESS	
13.48	CITY-STATE-ZIP	☐ Change ☐ Addition
13.49	TITLE	
13.50	NAME	
13.51	STREET ADDRESS	
13.52	CITY-STATE-ZIP	☐ Change ☐ Addition
13.53	TITLE	
13.54	NAME	
13.55	STREET ADDRESS	
13.56	CITY-STATE-ZIP	☐ Change ☐ Addition
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13.59	STREET ADDRESS	
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13.66	NAME	
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13.70	NAME	
13.71	STREET ADDRESS	
13.72	CITY-STATE-ZIP	☐ Change ☐ Addition
13.73	TITLE	
13.74	NAME	
13.75	STREET ADDRESS	
13.76	CITY-STATE-ZIP	☐ Change ☐ Addition
13.77	TITLE	
13.78	NAME	
13.79	STREET ADDRESS	
13.80	CITY-STATE-ZIP	☐ Change ☐ Addition
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13.84	CITY-STATE-ZIP	☐ Change ☐ Addition
13.85	TITLE	
13.86	NAME	
13.87	STREET ADDRESS	
13.88	CITY-STATE-ZIP	☐ Change ☐ Addition
13.89	TITLE	
13.90	NAME	
13.91	STREET ADDRESS	
13.92	CITY-STATE-ZIP	☐ Change ☐ Addition
13.93	TITLE	
13.94	NAME	
13.95	STREET ADDRESS	
13.96	CITY-STATE-ZIP	☐ Change ☐ Addition
13.97	TITLE	
13.98	NAME	
13.99	STREET ADDRESS	
13.100	CITY-STATE-ZIP	☐ Change ☐ Addition

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 included 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 of this report, or on an attachment with an address.

SIGNATURE:

Walter A. Gibbins
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WALTER A. GIBBINS

3/15/97

904-428-6425

0027657

CR2E034 (9/96)