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

FILED Apr 28 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (5) CROOM CONSTRUCTION COMPANY Principal Place of Business Mailing Address 4733 N HIGHWAY ATA 4733 N HIGHWAY A1A VERO BEACH FL 32963-5401 **VERO BEACH FL 32963-5401** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/10/1987 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1827941 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional K. 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Zιρ Country 8. This corporation owes or has paid the current year Intangible ☐ No Yes Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name CROOM, DAVID S. 4733 N. HIGHWAY AIA Street Address (P.O. Box Number is Not Acceptable) VERO BEACH FL 83 City Zip Code 2 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered ations of Section 107.0505, Florida Statutes. Pursuant to the provisions of Sections office or registered agent to both, in agent. I am familiar with David S. Croom, 4/13/98 DATE SIGNATURE President Signature, typud or aktabilgga fi and bira li 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition Change TITLE 11 TITLE CROOM, DAVID S. NAME 1.2 NAME 4733 N HIGHWAY A1A STREET ADDRESS 1.3 STREET ADDRESS VERO BEACH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE CROOM, SUE A. NAME 2.2 NAME 4733 N HWY A1A STREET ADDRESS 2.3 STREET ADDRESS **VERO 8CH FL** 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 THLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change TITLE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

CITY-ST-ZIP 14. Thereby certify that the information supplied with this filling 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 of 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 expon an attaching a little an address.

DELETE

5.4 CITY - ST-ZIP

63 STREET ADDRESS 64 CITY - ST - ZIP

6 1 TITLE

62 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE NAME

wyid S. Croom, President

4/13/98

561-231-1703

Change

Addition