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Jul 08 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # L40132

(7)

1. Corporation Name

WALBRIDGE CONTRACTING, INC.

Principal Place of Business

410 WARE BLVD., SUITE 900
TAMPA FL 33619

Mailing Address

410 WARE BLVD., SUITE 900
TAMPA FL 33619-4439

3. Date Incorporated or Qualified

01/04/1990

3a. Date of Last Report

04/02/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

65-0160996

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

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME RAKOLTA, JOHN R.
STREET ADDRESS 613 ABBOTT ST
CITY-ST-ZIP DETROIT MI ☐ DELETE

TITLE STD
NAME GARVEY, KEVIN R.
STREET ADDRESS 410 WARE BLVD STE 900
CITY-ST-ZIP TAMPA FL ☐ DELETE

TITLE V
NAME MCINTYRE, MICHAEL P
STREET ADDRESS 410 WARE BLVD STE 900
CITY-ST-ZIP TAMPA FL ☐ DELETE

TITLE CD
NAME HALLER, RICHARD J
STREET ADDRESS 613 ABBOTT ST.
CITY-ST-ZIP DETROIT MI ☐ DELETE

TITLE PD
NAME EMPRIC, THOMAS W
STREET ADDRESS 410 WARD BLVD / STE - 900
CITY-ST-ZIP TAMPA FL ☐ DELETE

TITLE D
NAME HAUSMANN, RONALD L
STREET ADDRESS 613 ABBOTT ST.
CITY-ST-ZIP DETROIT MI 48226 ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE V ☐ Change ☒ Addition
1.2 NAME Timothy Davis
1.3 STREET ADDRESS 410 Ware Blvd., Suite 900
1.4 CITY-ST-ZIP Tampa, FL 33619

2.1 TITLE V ☐ Change ☐ Addition
2.2 NAME Jeffrey W. Lee
2.3 STREET ADDRESS 410 Ware Blvd., Suite 900
2.4 CITY-ST-ZIP Tampa, FL 33619

3.1 TITLE V ☐ Change ☐ Addition
3.2 NAME Richard Marshall
3.3 STREET ADDRESS 410 Ware Blvd.
3.4 CITY-ST-ZIP Tampa, FL 33619

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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 registered agent authorized to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if applicable.

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JL