# FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

**1996**

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

DOCUMENT # **L75868** **(4)**

1. Corporation Name

**BLAZER CONSTRUCTION INDUSTRIES, INC.**

Principal Place of Business

**407 COMMERCE WAY**
**STE 1A**
**JUPITER FL 33458**
**US**

Mailing Address

**407 COMMERCE WAY STE 1A**
**STE 1A**
**JUPITER FL 33458**
**US**

3. Date Incorporated or Qualified: **05/25/1990**

3a. Date of Last Report: **05/01/1995**

4. FEI Number: **65-0194488** ☐ 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

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent

**82**
**4114 NORTHLAKE BLVD**
**PALM BCH GDNS FL**

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 Section 607.0501, Florida Statutes, the following named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The corporation is authorized to do business in Florida and its registered office and registered agent will be identical. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS

| | | |
|---|---|---|
| TITLE | **DTS** | ☐ DELETE |
| NAME | **HUGHES, TODD A.** | |
| STREET ADDRESS | **407 COMMERCE WAY, #2A** | |
| CITY-ST-ZIP | **JUPITER FL** | |
| TITLE | **PD** | ☐ DELETE |
| NAME | **VERMURLEN, ROBERT R.** | |
| STREET ADDRESS | **407 COMMERCE WAY #2A** | |
| CITY-ST-ZIP | **JUPITER FL** | |
| TITLE | **DVP** | ☐ DELETE |
| NAME | **EMIG, LARRY E.** | |
| STREET ADDRESS | **407 COMMERCE WAY #2A** | |
| CITY-ST-ZIP | **JUPITER FL** | |
| TITLE | | ☐ DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | | |
|---|---|---|
| 1-TITLE | ☐ Change | ☐ Addition |
| 1-NAME | | |
| 1-STREET ADDRESS | | |
| 1-CITY-ST-ZIP | | |
| 2-TITLE | ☐ Change | ☐ Addition |
| 2-NAME | | |
| 2-STREET ADDRESS | | |
| 2-CITY-ST-ZIP | | |
| 3-TITLE | ☐ Change | ☐ Addition |
| 3-NAME | | |
| 3-STREET ADDRESS | | |
| 3-CITY-ST-ZIP | | |
| 4-TITLE | ☐ Change | ☐ Addition |
| 4-NAME | | |
| 4-STREET ADDRESS | | |
| 4-CITY-ST-ZIP | | |
| 5-TITLE | ☐ Change | ☐ Addition |
| 5-NAME | | |
| 5-STREET ADDRESS | | |
| 5-CITY-ST-ZIP | | |
| 6-TITLE | ☐ Change | ☐ Addition |
| 6-NAME | | |
| 6-STREET ADDRESS | | |
| 6-CITY-ST-ZIP | | |

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is true and accurate, that this filing is and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 with an indication for the filing of this report.

**SIGNATURE:** Robert R. VerMurlen **4-26-96** **(407) 575-3124**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME TELEPHONE #