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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P24940

ADDRESS

CLANCY & THEYS CONSTRUCTION CO.

						BIBII BIBII BIBII B	MAN BABA BABA MEN
rincipal Place of Business Mailing Address							
3 WEST CABARRUS STREET PO BOX 11008 LEIGH NC 27604 RALEIGH NC 27604						61511 61511 61	imto mannet midit 1001
					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
Principal Place of Business 2a Mailing Address					06/27/1989		
Mopa	i i lace of busiless	2a. Mailing Address			4. FEI Number	т	Applied For
Suite, Apt. #, etc.		26			56-0509939		
odito, A	л. <i>п</i> , е.с.	Suite, Apt. #, etc.					Not Applicable 5 Additional
City & State		27			5. Certifcate of Status Desired		Additional Required
Only to St		City & State			6, Election Campaign Financing		
Zip		28			Trust Fund Contribution	<u>~_</u> \$5. <u>U</u>	0 Мау Ве
Zip	Country	Zip	Co	untry	8. This corporation owes the current year	Adde	d to Fees
	25	29	30		Personal Property Tax.	r intangible □ Yes	<i>-</i>
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Register	res	□No
POSTON, WILLIAM C				81 Name	The Address of New Registered Agent		
10700 RITLER BAY OF				-			
12729 BUTLER BAY CT				82 Street Address (P.O. Box Number is Not Acceptable)			
WINDERMERE FL 34786				83			
				• •			
				84 City		. 85 Zir	Code
Pursuan	t to the provisions of Sections 607 050	12 and 607 1509 Florida State		L L	F	•	ł
office or	registered agent, or both, in the State	of Florida. Such change was	utes, the all authorized	Dove-named corp	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing if	ts registered
•	and decept the obliga	itions of, Section 607.0505, FI	lorida State	ites.	on a board of directors. I hereby accept the ap	pointment as r	egistered
NATURE	Signature, typed or printed name of registered ager				•		ļ
	OFFICERS AN	ID DIRECTORS (NOT		Agent signature require	d when reinstating) DATE		
	PT	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN 12
	CLANCY, DAVID T.	I DELETE	1.1 T/T	LE		☐ Change	
ET ADDRESS	l		1.2 NA	ME			
Parameter and			1.3 ST		s		J
T-ZIP	NALEIGH NO		1.4 CIT	Y-ST-ZIP			
	OLANOV 10-1	☐ DELETE	2.1 TIT	.E		☐ Change	
i	CLANCY, JOEL T.		2.2 NA	Æ .		change	☐ Addition
TADDRESS	TOTAL OF THE OF THE OF THE		2.3 STR	EET ADDRESS			1
T-ZIP	RALEIGH NC		- 1	Y-ST-ZIP			ļ
	VS	☐ DELETE	3.1 TITL				
i	Oakley, andrew L.		3.2 NAM			Change	- Addition
TADDRESS	8912 RENSDELL RD						1
T-ZIP	RALEIGH NC			EET ADDRESS			
		☐ DELETE		/-ST-ZIP		_	ļ
ł		r⊓ nere1€	4.1 TITL	-		Change	☐ Addition
ADDRESS			4. 2 NAM	E		-	_
-ZIP			4.3 STRE	ET ADDRESS			-
- LIF			4.4 C/TY	ST-ZIP			
- 1			5.1 TITL F				

pereby 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 dicated 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 ock 12 or Block 13 if chapter, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

NATURE:

919 834 3601

Change

☐ Addition

Addition

FILED

Feb 18, 1999 8:00am

Secretary of State

02-18-1999 90092 040 ***150.00