

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

**CORPORATION
ANNUAL REPORT
1995**



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

APPROVED
AND
FILED

95 MAY -1 AM 1:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000007846 (6)

1. Corporation Name

PAVEMENT MAINTENANCE, INC.

Principal Place of Business

Mailing Address

C/O RICHARD W. WINESETT
POST OFFICE DRAWER 610
FT. MYERS FL 33902

C/O RICHARD W. WINESETT
POST OFFICE DRAWER 610
FT. MYERS FL 33902

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/19/1994

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 8999 High Cotton Lane

26

4. FEI Number

65-0461510

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

City & State

City & State

23 Fort Myers, FL

27

6. Election Campaign Financing
Trust Fund Contribution



**\$5.00 May Be
Added to Fees**

Zip

Country

Zip

Country

24 33905

25 Lee

29

30

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes



9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WINESETT, RICHARD W
2248 FIRST ST.
FT. MYERS FL 33901**

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
SKABAR, RONALD O
107 SW 51ST TERRACE
CAPE CORAL FL 33914**

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
DP ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
**DVP
Sustersic, Thomas
3795 Tall Timbers** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
**Richfield, OH 44286
DVP
Dorman, Charles
151 Nicholas Blvd.
N. Ft. Myers, FL 33903** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
**DST
McKinley, Ronald B.
25285 Osborne
Columbia Station, OH 44028** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
**D
Skabar, Nancy C. Ros.
107 S.W. 51st Terrace
Cape Coral, FL 33914** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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 if changed, or on an attachment with an address.

SIGNATURE:

Ronald O. Skabar Pres.

1/27/94

(813) 334-6760

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ronald O. Skabar, President