

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

FILED

May 06 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 # 416603 (9)

1. Corporation Name
PALM COAST CONSTRUCTION COMPANY

Principal Place of Business

EXECUTIVE OFFICE
1 CORPORATE DRIVE
PALM COAST FL 32151

Mailing Address

EXECUTIVE OFFICE
1 CORPORATE DRIVE
PALM COAST FL 32151-0001

3. Date Incorporated or Qualified
01/15/1973

3a. Date of Last Report
03/07/1996

4. FEI Number
13-2809339

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 Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

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 fee if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE V
NAME BUTLER, SAMUEL JR.
STREET ADDRESS EXECUTIVE OFFICE, 1 CORPORATE DRIVE
CITY-ST-ZIP PALM COAST FL

TITLE P
NAME GARDNER, JAMES E
STREET ADDRESS EXECUTIVE OFFICE, 1 CORPORATE DRIVE
CITY-ST-ZIP PALM COAST FL

TITLE S
NAME CUFF, ROBERT G., JR.
STREET ADDRESS EXECUTIVE OFFICE, 1 CORPORATE DRIVE
CITY-ST-ZIP PALM COAST FL

TITLE V
NAME CLINE, SAM
STREET ADDRESS EXECUTIVE OFFICE, 1 CORPORATE DRIVE
CITY-ST-ZIP PALM COAST FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VID
1.2 NAME SAM BUTLER, JR.
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE P/D
2.2 NAME JAMES E. GARDNER
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE V/T
3.2 NAME CHARLES J. CALLEA
3.3 STREET ADDRESS EXECUTIVE OFFICE
3.4 CITY-ST-ZIP PALM COAST, FL 32151

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

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 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 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 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, as an attachment with an address.

SIGNATURE

4/11/97

904 445 3647

CR2E034 (9/96)