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 # F9700004814

GEISLER CONTRACTING, INC.

Principal Place of Business

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY+ST-ZIP

CITY-ST-ZIP

Mailing Address

Apr 05, 1999 8:00 am Secretary of State

04-05-1999 90020 043 ***150.00



· morpar · lao	5 Of B 00111000									
PO BOX 216 HEADLAND AL 36345		PO BOX 216 HEADLAND AL 36345			DO NOT WE	RITE IN THIS	SPACE			
						3. Date Incorporated or Qualife				
-·· ········						09/16/1997				
2 Principal P	lace of Business	2a, Mailing Address				4. FEI Number		Apr	olied For	
Z. Fillicipal F	lace of Business	26				63-1025080		Not	Applicable	
Suite, Apt.	# etc	Suite, Apt. #, etc.		_				\$8.75 A		
¬ ''	#, etc.	27				5. Certifcate of Status Desired		Fee Red		
City & Stat	Δ	City & State		_		6. Election Campaign Financing	 1	\$5.00	May Ro	
23	•	28	,			Trust Fund Contribution	' _□	Added to	•	
Zip	Country	Zip	Cou	intry		8. This corporation owes the cu	rrent vear in	tangible		
ā - T	25		30	•		Personal Property Tax.	,		□No	
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent				
		· · · · · · · · · · · · · · · · · · ·		81	Name					
GEISLER, DONALD A						And the second s				
7713 DELEVIL				82	Street A	Idress (P.O. Box Number is Not Accep	itable)			
TAMPA FL 33610				83		·····				
				84	City		FL	85 Zip C	ode	
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligation	f Florida. Such change was au ons of, Section 607.0505, Flori	thorized ida Stat	d by utes	the corpora	ation's board of directors. I nereby acc	ept the appoi	intment as reg	registered ristered	
	Signature, typed or printed name of registered agent			Agen	it signature req	uired when reinstating) ADDITIONS/CHANGES TO C		ND DIRECTO	PS IN 12	
12.	OFFICERS AND	DELETE	13.		· I	ADDITIONS/CHANGES TO C	rricens Ai	Change	Addition	
TITLE	P	☐ DECE IE	1,1 TI		į					
NAME	GEIGLEN, GEORGE V DIT			1.2 NAME						
STREET ADDRESS	100 0110/10 07		1.3 \$	TREET	ADDRESS					
CITY-ST-ZIP	HEADLAND AL 36345			ITY-S	r-ZIP			☐ Change	☐ Addition	
TITLE	VST	☐ DELETE	2.1 TI	TLE				Change	☐ Addition	
NAME:	-GEISLER, BETTY-JO	ستهما والمميسين الراجيم	2.2 N	AME.			<u> </u>		*	
STREET ADDRESS	105 BROAD ST		2.3 S	TREET	ADDRESS	~				
CITY-ST-ZIP	HEADLAND AL 36345		2.40	iTY-S	T-ZIP					
TITLE		☐ DELETE	3.1 T	TLE	ĺ			Change	☐ Addition	
NAME			3.2 N	AME		****				
STREET ADDRESS			3.3 S	TREET	ADDRESS	-	-			
CITY-ST-ZIP			3.4.0	HY-S	T-ZIP					
TITI F	-	☐ DELETE	4.1 T	TLE.				Change	☐ Addition	

CITY-ST-ZIP 14. I 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, or on an attachment with an address, with all other like empowered.

4, 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

□ DELETE

☐ DELETE

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

្សាក្ត្តិខ្មីទ្វler, VST SIGNATURE:

Change

Change

☐ Addition

☐ Addition