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

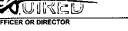
DOCUMENT # 214711

1. Corporation Name

EVERHAI	RT CONSTRUCTION COM	PANY INC								
Principal Place	e of Business	Mailing Address		~			(100170 11001 ITALI BIBLI JOSO	ildi ilai misii si	#19 #1#11 WIDII I	51811 A1811 1991
916 IVANHOE P P.O. BOX 3746		P.O. BOX 3746 TALLAHASSEE FL 32315				50 MOT 19	NTC IN TURA			
TALLAHASSEE FL 32312 US						_		RITE IN THIS	SPACE	
US							 Date Incorporated or Qualife 08/15/1958 	o .		
2 Deinainal D	one of Business	2a. Mailing Address					4. FEI Number		— Ar	plied For
2. Principal Place of Business		26				59-0859071		<u> </u>	ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.						\$8.75	Additional	
22		27				5. Certificate of Status Desired		, Fee Re	equired	
City & State		City & State				6. Election Campaign Financin	3 🗆		May Be	
23		28				Trust Fund Contribution			to Fees	
Zip	Country	Zip		intry			8. This corporation owes the cu	irrent year Inta	angible □Yes	≥ No
24	25	29	30	1			Personal Property Tax. 10. Name and Address of New	Registered (*23 10
	9. Name and Address of Curre	nt Registered Agent		81	Name		to. Name and Address of Nor	r registeres :	- rgont	
EVE	RHART,LEE A			82						
916 IVANHOE RD					Street	Address	ss (P.O. Box Number is Not Acceptable)			
	AHASSEE FL 32303	•		83						
										0-4-
	•			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 re 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 regis agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								registered egistered		
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable.	(NOTE: Registere	d Agen	t signature r	equired wh	nen reinstating)	DATE		
12.	OFFICERS A	ND DIRECTORS	13.			r	ADDITIONS/CHANGES TO	FFICERS AN		
TITLE	VD	☐ DELE	TE 1.1 T	ITLE			•		Change	☐ Addition
NAME	EVERHART, LEE ANN		1.2 N)
STREET ADORESS	2906 IVANHOE ROAD			1.3 STREET ADDRESS		!	•			
CITY-ST-ZIP	TALLAHASSEE FL	DELETE		1.4 CITY-ST-ZIP			······································		☐ Change	Addition
TITLE	PD	-		2.1 TITLE 2.2 NAME					Change	
NAME	EVERHART, LEE A				4000000					
STREET ADDRESS	916 IVANHOE ROAD				ADDRESS		and the second of the second		, ₅ . • . • •	
CITY-ST-ZIP	TALLAHASSEE FL			2.4 CITY-ST-ZIP 3.1 TITLE			•		☐ Change	☐ Addition
NAME	EVERHART, MARGARET R		3.2 N							
STREET ADDRESS	016 IVANHOE ROAD		3.3 S	TREET	ADDRESS					
CITY-ST-ZIP	TALLAHASSEE FL			CITY-S						
TITLE	7722401000272	☐ DELI							☐ Change	☐ Addition
NAME			4.21	VAME			•			
STREET ADDRESS	•		4.3 S	TREET	ADDRESS					}
CITY-ST-ZIP	<u></u>		4.4 C	ITY-S	T-ZIP					
TITLE		☐ DELI							Change	☐ Addition
NAME			5.2 N							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP				TY-S	T•ZIP				Chanca	☐ Addition
TITLE		☐ DELI							☐ Change	
NAME	re Marian in elemen		6.2 N		ADDRESS					
STREET ADDRESS	MARKET I SER									
CITY-ST-ZIP	FINANCIA DE	,***** <u>-</u>	6.40	ITY-S	1-ДР	<u> </u>			ee at 1.11 -	

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 attackment with an address, with all other like empowered.

SIGNATURE:



Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90188 029 ***150.00