

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 217502

1. Entity Name
DEAN STEEL BUILDINGS, INC.



Principal Place of Business
2929 INDUSTRIAL AVE
FT MYERS, FL 33901

Mailing Address
2929 INDUSTRIAL AVE
FT MYERS, FL 33901

FILED
08 SEP 15 AM 11:47
CLERK OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

09112008 Chg-P CR2E034 (12/06)

City & State

City & State

4. FEI Number

59-0866523

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DEAN, CHARLES W
2929 INDUSTRIAL AVENUE
FT MYERS, FL 33901

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

900136106309
09/18/08--01047--018 **70.00

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE S ☐ Delete
NAME DEAN, KAREN RAE
STREET ADDRESS 2444 MCGREGOR BLVD
CITY-ST-ZIP FORT MYERS, FL

TITLE P ☐ Change ☐ Addition
NAME DEAN, NANETTE
STREET ADDRESS 12842 KEDLESTON CIR
CITY-ST-ZIP FORT MYERS, FL 33912

TITLE V ☐ Delete
NAME CLARK, WILLIAM A
STREET ADDRESS P.O. BOX 1378
CITY-ST-ZIP FORT MYERS, FL

TITLE DC ☐ Change ☐ Addition
NAME DEAN, CHARLES W.
STREET ADDRESS 2444 MCGREGOR BLVD.
CITY-ST-ZIP FORT MYERS, FL 33901

TITLE DCP ☐ Delete
NAME DEAN, CHARLES W
STREET ADDRESS 2444 MCGREGOR BLVD
CITY-ST-ZIP FT MYERS, FL 00000,

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete
NAME FISHER, JULIE
STREET ADDRESS 12 COVENTRY DR
CITY-ST-ZIP ROME, GA 30161

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Delete
NAME DEAN, NANETTE
STREET ADDRESS 12842 KEDLESTON CIR
CITY-ST-ZIP FORT MYERS, FL 33912

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Delete
NAME RICHARDS, JEANETTE
STREET ADDRESS 2929 INDUSTRIAL AVE
CITY-ST-ZIP FORT MYERS, FL 33901

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Karen Rae Dean* KAREN RAE DEAN

09/11/08

239-334-1051

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #