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FILED
Feb 25 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 218821 (7)
1. Corporation Name
HAMMER & HOWELL BUILDERS, INC.

Principal Place of Business

Mailing Address

4112 W. OSBORNE
P.O. BOX 15456
TAMPA FL 33684

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P.O. BOX 15456
TAMPA FL 33684

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/02/1959

4. FEI Number

59-1561557

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 4725 N LOIS AVENUE

Suite, Apt. #, etc.

22

City & State

23 TAMPA FLA

Zip

24 33614

Country

25 USA

2a. Mailing Address

26 4725 N LOIS AVE

Suite, Apt. #, etc.

27

City & State

28 TAMPA FLA

Zip

29 33614

Country

30 USA

9. Name and Address of Current Registered Agent

TRUEX, JAMES R.

10023 BRIGADOON DRIVE
TAMPA 33618

4107 Brentwood Park
Circle
Tampa, FL 33624

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 title (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME TRUEX, JAMES, R
STREET ADDRESS 10023 BRIGADOON DRIVE
CITY-ST-ZIP TAMPA FL

TITLE V ☐ DELETE

NAME SCIME, MARK, SCOTT
STREET ADDRESS 11801 AUTUMN GARDENS CT
CITY-ST-ZIP TAMPA FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 4107 Brentwood Park Circle
1.4 CITY-ST-ZIP Tampa, FL 33624

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 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.

SIGNATURE:

Mark Scott Scime

VICE-PRESIDENT

1/15/98 813-877-6077

CR2E034 (1097)