Mar 08, 1999 8:00 am Secretary of State

03-08-1999 90021 019 ***150.00

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

DOCU	MENT # 248562						
	T. MOOREFIELD PAVING (CONTRACTORS, INC.					
Principal Place of Business Mailing Address					T HOUSE TEACH BEAST STEAD BEING DISCO STAN OF DE	'S BINII MANII BINII N	1811 B#811 1881
2036 BRIGHTWATER BLVD. NE 2036 BRIGHTWATERS BLVD ST PETERSBURG FL 37704 ST PETERSBURG FL 33704					DO NOT WRITE IN TH	IIS SPACE	
US		us			3. Date Incorporated or Qualifed		
					06/19/1961		
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	<u> </u>	plied For
21		26		59-0933407		t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A	I .	
City & State		City & State		6. Election Campaign Financing	\$5.00		
23		28		Trust Fund Contribution	Added to		
Zip	Country Zip		Coun	try	8. This corporation owes the current year	es the current year Intangible	
24	25	29	30		Personal Property Tax.	Yes	□No
_;;,	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Register	d Agent	
				81 Name			
MOOREFIELD, HARRY M.				82 Street Ad	Idress (P.O. Box Number is Not Acceptable)		
	Brightwaters BLVD., NE Petersburg Fl. 33704						
31 r	ETENSBUNG FL 33/04			83			l
				84 City		85 Zip C	Code
		- 100= 1500 St 11- Otal	1 - 1 1		-	_ , ,	registered
office or o	enistered agent or both in the State	of Florida, Such change was	autnonzed	by the corbora	orporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	pointment as reg	gistered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, Fl	orida Statu	tes.		-	
SIGNATURE	Signature, typed or printed name of registered ager	t and title of applicable (NOT	FE: Pagistared A	Agent signature requi	uired when reinstating) DATE		—— \
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE			1.1 TITI	.E		☐ Change	☐ Addition)
NAME	MOOREFIELD, HARRY M	M 1.2 N		ME			,
STREET ADDRESS	ACCA PRIOUTHIATERO DI VID	036 BRIGHTWATERS BLVD 135		REET ADDRESS			
CITY-ST-ZIP			14 CIT	Y-ST-ZIP			
TITLE			2.1 TITI	Æ		☐ Change	Addition
NAME ~			2.2 NA	ME			
STREET ADDRESS			2.3 STF	REET ADDRESS			1
CITY-ST-ZIP				Y-ST-ZIP		Change	☐ Addition
TITLE		☐ DELETE				☐ Change	☐ Madicoli (
NAME			3.2 NAJ				
STREET ADDRESS	:			REET ADDRESS			
CITY-ST-ZIP		☐ DELETE		Y-ST-ZIP		☐ Change	Addition
TITLE			4.1 TITE 4.2 NA				D
NAME.				REET ADDRESS			
STREET ADDRESS				Y-ST-ZIP			
CITY-ST-ZIP TITLE		DELETE	5.1 TITI		· · · · · · · · · · · · · · · · · · ·	☐ Change	☐ Addition
NAME			5 2 NAI	I .		-	{
STREET ADDRESS			5.3 STF	REET ADDRESS	·		
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP	<u>_</u>		
TITLE		☐ DELETE	6.1 T/T	LE		☐ Change	Addition
NAME			6.2 NA	ME			I
STREET ADDRESS			6.3 STI	REET ADDRESS			

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.