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Jan 28 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 327253 (1)

1. Corporation Name
SIGNAL CONSTRUCTION COMPANY INC

Principal Place of Business
4440 PGA BOULEVARD
SUITE 600
PALM BEACH GARDENS FL 33410
US

Mailing Address
4440 PGA BOULEVARD
SUITE 600
PALM BEACH GARDENS FL 33410-6542
US



3. Date Incorporated or Qualified 03/07/1968
3a. Date of Last Report 03/14/1996

4. FEI Number 59-1223341
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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME ROSEMAN, RONALD L
STREET ADDRESS 4440 PGA BOULEVARD, SUITE 600
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

1.1 TITLE
1.2 NAME STEVE E. NIELSEN
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VP
NAME KOHLER, ALVIN W
STREET ADDRESS 4440 PGA BOULEVARD, SUITE 600
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE VPD
NAME PLEDGER, THOMAS R
STREET ADDRESS 4440 PGA BOULEVARD, SUITE 600
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE T
NAME BETLACH, DOUGLAS J
STREET ADDRESS 4440 PGA BOULEVARD, SUITE 600
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE S
NAME FRAZIER, PATRICIA
STREET ADDRESS 4440 PGA BOULEVARD, SUITE 600
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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

TREASURER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/3/97

(561) 627-7171

Date

Daytime Phone #

CR2E034 (9/96)