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

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90014 031 ***150.00

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|------------|------|-------|
| DOCUMENT | # 3/ | 48903 |

1. Corporation Name

J.Q. HALL CONSTRUCTION, INC.

| Principal Place | e of Business | Mailing Address | | | 1 100100 IIIII 84001 1014E 10411 80100 1111 | PIGIT BIGHT GIRTS GIRTS GC | |
|---|--|-------------------------------|--------------------|---|--|----------------------------|------------|
| 2203 MYRTLE | AVE | 2203 MYRTLE AVE | | • • | | | |
| JACKSONVILLE FL 32209 JACKSONVILLE FL 32209 | | DO NOT WRITE IN | TUIC COACE | | | | |
| | | | | | | THIS SPACE | |
| | | | | | 3. Date Incorporated or Qualifed | | |
| | | | | | 07/02/1969 4. FEI Number | 114 | lied For |
| | lace of Business | 2a. Mailing Address | | , | | | |
| 21 | | 26 | | | 59-1522008 | \$8.75 AG | Applicable |
| Suite, Apt. | #, e1c. | Suite, Apt. #, etc. | | 5. Certifcate of Status Desired | Fee Red | | |
| 22 | | City & State | | O Sharing Company Sharaha | \$5,00 N | ——- | |
| City & State | e | 28 | | | 6. Election Campaign Financing Trust Fund Contribution | Added to | · . |
| 23 Zin | Country | Zip | Cou | | 8. This corporation owes the current y | | |
| 24 | | | , | Personal Property Tax. | | ⊒No I | |
| 24 | 9. Name and Address of Curre | | 1901 | | 10. Name and Address of New Regis | tered Agent | |
| | - I THE PARTY OF T | | | 81 Name | | 7 tu | |
| HALI | l, jesse q | | | - O + + + + + + + + + + + + + + + + + + | (D.O. D. M. sharia Nat Acceptable) | انت - | |
| 2203 | MYRTLE AVE | | | 82 Street Add | ress (P.O. Box Number is Not Acceptable) | • | |
| JACI | KSONVILLE FL 32209 | _ | | 83 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| ļ | | | | | | last at a | |
| | | | | 84 City | | FL 85 Zip Co | ode |
| 11 Pursuant | to the provisions of Sections 607 05 | 502 and 607.1508. Florid | a Statutes, the al | ove-named corp | poration submits this statement for the purp | ose of changing its r | egistered |
| office or r | egistered agent, or both, in the Stat m familiar with, and accept the oblic | e of Florida. Such chang | e was authorized | by the corporati | on's board of directors. I hereby accept the | appointment as regi | istered |
| agent. ra | m familiar with, and accept the oblig | jations of, Section 607.0 | oos, Fiorida Statt | iles. | | | } |
| SIGNATURE | Signature, typed or printed name of registered a | cent and title if applicable. | (NOTE: Registered | Agent signature require | od when reinstating) Di | ATE | \ |
| 12. | | AND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFICE | RS AND DIRECTOR | RS IN 12 |
| TITLE | PD | □ DE | LETE 1.1 TIT | LÉ | | Change | Addition |
| NAME | HALL, JESSE Q | | 1.2 NA | ME | | | } |
| STREET ADDRESS | 2203 MYRTLE AVE. | | 1.3 ST | REET ADDRESS | | | |
| CITY ST-ZIP | JACKSONVILLE FL" - | حالم المحمل وبيم المديم | ± · · == 1.4 C∏ | Y ST-ZIP | | | |
| TITLE | SD | ☐ DE | LETE 2.1 TT | LE | | Change | ☐ Addition |
| NAME | EDWARDS, QUINTON | | 2.2 NA | ME | | | ļ |
| STREET ADDRESS | 4001 SOUTEL DR | | 2.3 ST | REET ADDRESS | | | |
| CITY-ST-ZIP | JACKSONVILLE FL | | 2.4 C | TY-ST-ZIP | | | |
| TITLE | | □ DE | | | | Change | Addition |
| NAME | | | 3.2 NA | ме | | | ĺ |
| STREET ADDRESS | | | 3.3 ST | REET ADDRESS | | | 1 |
| CITY-ST-ZIP | | | | TY-ST-ZIP | | | |
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| STREET ADDRESS | , , | | 4.3 ST | REET ADDRESS | | | |
| CITY-ST-ZIP | a se orient | | | Y-ST-ZIP | | | { |
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| TITLE | | □ DE | LETE 6.1 TIT | LE | | ☐ Change | Addition |
| NAME | | | 6.2 NA | ME | | | |
| Į | į . | | 6397 | REET ADDRESS | | | |
| STREET ADDRESS | | | 0.5 01 | KEE I ADDKESS | | | • |

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.

SIGNATURE:

OSIGNATION E HIGHING OFFICER OF DIRECTOR

4-13-99

904-3536842

Daytime Phone