Applied For

□No

Fee Required

\$5.00 May Be

Added to Fees

Yes

Not Applicable \$8.75 Additional

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

DOCUMENT # 384073

1. Corporation CHUREY	& SON CONSTRUCTION					
Principal Place	Principal Place of Business		ress		1.150.05 [1(5) 1011, 51511 5011 1000 111 111 111	
931 N W 10TH A		931 N W 10T BOYNTON BE	H AVE ACH FL 33426			
					DO NOT WRITE IN THIS S	PAC
					3. Date Incorporated or Qualifed 06/16/1971	
2. Principal Pla	ace of Business	2a. Mailing A	Address		4. FEI Number 59-1359322	
	Suite, Apt. #, etc.		vt. #, etc.		5. Certifcate of Status Desired	\$8.
City & State	•	City & Si	ate		6. Election Campaign Financing Trust Fund Contribution	\$5 Ac
Zip	Country 25	Zip 29	Country	/	This corporation owes the current year Intal Personal Property Tax.	ngible Ye:
	9. Name and Address of Ci	rrent Registered Age	ent		10. Name and Address of New Registered A	gent
	BERG, JOSEPH		81		ress (P.O. Box Number is Not Acceptable)	•

FILED Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90127 028 ***150.00



BOYNTON BCH FL 33435			1						
			83						
			84	City			85	Zip Co	de
	<u></u>			,		<u>FL</u>	. []		
office or r	to the provisions of Sections 607.0502 and 607.1508, Fegistered agent, or both, in the State of Florida. Such cirn familiar with, and accept the obligations of, Section 6	nange was auth	orized by	the corporation	poration submits this stater on's board of directors. I h	nent for the purpose of ereby accept the appoi	changin ntment a	ig its re as regi:	egistered stered
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Day	sistered Agen	t expanses require	ed when reinstating)	DATE			
12.	OFFICERS AND DIRECTORS	(IVO) E. Re	13.	r signature raquire		SES TO OFFICERS AN	ID DIRE	CTOR	S IN 12
TITLE		DELETE	1.1 TITLE		ADDITIONOGIAN	SEO TO CITIOERO A	Cha		Addition
	CHUREY, JOHN	JULIE	1.2 NAME				_	J	
NAME	004 NR4 40 AVE			ADDRESS					
STREET ADDRESS									
CITY-ST-ZIP	BOYNTON BCH FL	DELETE	1.4 CITY-S	T-ZiP	.		☐ Cha	nna -	☐ Additio
TITLE] DEFEIE	2.1 TITLE					ingc	
AME	CHUREY,ROBERT		2.2 NAME						
TREET ADDRESS			2.3 STREET	ADORESS					
TY-ST-ZIP	BOYNTON BCH FL		2.4 CITY-\$	T-ZIP					
ITLE	SD	DELETE	3.1 TITLE				☐ Cha	inge	☐ Additio
IAME	CHUREY,THELMA		3.2 NAME			•			
TREET ADDRESS	931 NW 10 AVE.		33 STREET	ADDRESS					
CITY-ST-ZIP	BOYNTON BCH FL		3.4. CITY-S	T-ZIP					
TILE	D] DELETE	4.1 TITLE				Cha	inge	☐ Addition
IAME	CHUREY JR., JOHN		4,2 NAME						
TREET ADDRESS	4000 NIN TTH OT		4.3 STREET	ADDRESS					
TY-ST-ZIP	BOYNTON BCH. FL		4.4 CITY-S			•			
ITLE		DELETE	5.1 TITLE				Cha	ange	☐ Additio
IAME			5.2 NAME			_			
			5.3 STREET	ADORESS					
TREET ADDRESS			5.4 CITY-S				-		
HTY-ST-ZIP		DELETE	6.1 TITLE				☐ Cha	nge	Additio
TTLE I	 	J 520010	6.2 NAME						
AME	·			1000000					
TREET ADDRESS			6.3 STREET						
CITY-ST-ZIP	certify that the information supplied with this filing does i		6.4 CITY-S		<u> </u>				

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 ar 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.