FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Bandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

389753

(5)

DAN RAULERSON CONSTRUCTION, INC.

Principal Place of Business	Mailing Address			
189 ROWLAND DRIVE PUNTA GORDA FL 33980-2301	189 ROWLAND DRIVE PUNTA GORDA FL 33980-2301			
2. Principal Place of Business	2a. Mailing Address			

FILED Mar 19 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					-{				
li.									
189 ROWLAND DRIVE 189 ROWLAND DRIVE PUNTA GORDA FL 33980-2301 PUNTA GORDA FL 33980-2301									
1 PONTA GONDA TE 30300-2307		FUNIA GONDA PE 3390	FUNTA GONDA PL 33980-2301			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
						10/15/1971			
2. Principal P	Place of Business	2a. Mailing Address	·····			4. FEI Number		Applied For	
21		26				59-1363686		Not Applicable	
Suite, Apt.	#, etc	Suite, Apt. #, etc.	Suite, Apt. #, etc.				\$8.7	5 Additional	
22	27				5. Certificate of Status Desired		Required		
City & State City & State						6. Election Campaign Financing	\$5.0	May Be	
23						Trust Fund Contribution			
Zip	Country	Country Zip Cou		ntry		8. This corporation owes or has pald the current year Intangible			
24	25	29	30			Personal Property Tax due June 30. 🔀 Yes 🔲 No			
	9. Name and Address of Curre	int Registered Agent				10. Name and Address of New Registered	Agent		
RAULERSON,DANNIE L			1	81	Name				
	9 ROWLAND DR		Ì	82	B2 Street Address (P.O. Box Number is Not Acceptable)				
PU	NTA GORDA FL 33950								
				83					
			}	84	City		85 Zi	p Code	
L			- 1		-	FL	1 1	•	
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statut	les, the at	ove	-named corporati	oration submits this statement for the purpose of on's board of directors. I hereby accept the app	changing	its registered	
agent la	im familiar with, and accept the oblig	gations of, Section 607.0505, FI	orida Stati	utes	ine corporation.	on's board or directors. I hereby accept the app	xointment i	as registereo	
SIGNATURE									
	Signature, typed or printed name of registerics as			l Ager	nt signature require	ed when reinstaling) DATE			
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND			
TITLE	PD BALLEDOON DANKER	DELETE	1.1 117				Change	e [_] Addition	
NAME	400 DOMA AND DOME		1.2 NA						
STREET ADDRESS	DINET COMPA DI			1.3 STREET ADDRESS					
CITY-ST-ZIP	PUNTA GORDA FL			1.4 CITY-ST-ZIP				· • • · · · · · · · · · · · · · · · · ·	
TITLE	D			2.1 TITLE			Change	e	
NAME	1 7 11=			2.2 NAME					
STREET ADDRESS				2.3 STREET ADDRESS					
CITY-ST-ZIP					IT-ZIP				
TITLE				3 1 TITLE			☐ Change	e 🔲 Addition	
NAME			3.2 NA						
STREET ADORESS					ADDRESS				
CITY-ST-ZIP		T Bratze	3.4. CITY-		T-ZIP		—		
TITLE		DEFETE	4.1 TITLE				Change	e 🔲 Addition	
NAME			4. 2 NAME						
STREET ADDRESS			4 3 STREET						
CITY-ST-ZIP			44 CITY-		- ZIP				
TITLE		DELETE	5.1 TITLE				Change	Addition	
NAME			5.2 NA		İ				
STREET ADDRESS			5.3 STF	REET A	ADDRESS				
CITY-ST-ZIP			5.4 CIT		- ZIP				
TITLE		·		6.1 TITLE			Change	Addition	
NAME			6.2 NA	ME					
STREET ADORESS	DORESS 6.3 S		6.3 STF	REET A	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 13 if praying or on an attactured with an address.

SIGNATURE:

3-12-98 625 2994