FILED Mar 11, 1999 8:00 am Secretary of State

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

**PROFIT** CORPORATION



FLORIDA DEPARTMENT OF STATE

Katherine Harris

	AL REPORT Secretary of State  1999 DIVISION OF CORPOR			IONS	03-11-1999 90077 026 ***150.00
DOCUM 1. Corporation	MENT # 3897	53			
DAN RAULERSON CONSTRUCTION, INC.					
Principal Place of Business Mailing Address					# 100100 title) reins reint reski brinde titt baerr dreit erein ereit ereit rest
189 ROWLAND DRIVE PUNTA GORDA FL 33980-2301		189 ROWLAND DRIVE PUNTA GORDA FL 33980-230	189 ROWLAND DRIVE PUNTA GORDA FL 33980-2301		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed
					10/15/1971
·	ace of Business	2a. Mailing Address			4. FEI Number Applied For
21	<del></del>	26			59-1363686   Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27		5. Certificate of Status Desired
City & State		City & State	28		6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	•	8. This corporation owes the current year Intangible
24	25	29 3	0		Personal Property Tax. Y Yes No
	9. Name and Address of C	urrent Registered Agent	81	Name	10. Name and Address of New Registered Agent
RAULERSON,DANNIE L				Name	
189 ROWLAND DR			82 Street Ad		Address (P.O. Box Number is Not Acceptable)
PUNTA GORDA FL 33950			83		
FONTA GORDA FE 33930					
			84	City	FL 85 Zip Code
office or o	egistered agent, or both, in the :	7.0502 and 607.1508, Florida Statutes State of Florida. Such change was autl obligations of, Section 607.0505, Florid	horized by	the corp	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of register	ed agent and title if applicable (NOTE: R	legistered Age	nt signature i	required when reinstating) DATE
12.		RS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE		S Change X Addition
NAME Î	RAULERSON, DANNIE L		1,2 NAME		STACY L RAULERSON
STREET ADDRESS	189 ROWLAND DRIVE		1.3 STREE	TADDRESS	189 ROWLAND DRIVE
CITY-ST-ZIP	PUNTA GORDA FL		1.4 CITY-S	T-ZIP	PUNTA GORDA FL
TITLE	D	☐ DELETE	2.1 TITLE	·	☐ Change ☐ Addition
NAME	RAULERSON, JANETTE		22 NAME		
STREET ADDRESS	189 ROWLAND DRIVE		2.3 STREE	TADORESS	
CITY-ST-ZIP	PUNTA GORDA FL		2. 4 CITY-5	ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	3.2 N		3.2 NAME		
STREET ADDRESS	ESS 3.3 S		3.3 STREE	T ADDRESS	
CITY-ST-ZIP			3.4. CITY-S	ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS				TADDRESS	
CITY-ST-ZIP		DELETE	4.4 CITY-S	T-ZIP	☐ Change ☐ Addition
TITLE		□ pere i¢	5.1 TITLE 5.2 NAME		
NAME				T ADDRESS	, ·
STREET ADDRESS			54 CITY-S		
CITY-ST-ZIP			3 - 0// / - 0		

6.4 CITY-ST-ZIP CITY-ST-ZIP 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 shanged, or on an attachment with an address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

TITLE

NAME

STREET ADDRESS

) Will Jav

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

Change

☐ Addition