## 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 # 399250 1. Corporation Name

W.H. TOBENER CONSTRUCTION, INC.

## **FILED** Jan 26, 1999 8:00am **Secretary of State**

01-26-1999 90002 023 \*\*\*150.00



Principal Place	e of Business	Mailing Address			, (40)41 (11)2				
2051 SOUTH C	ONFERENCE DR.	2051 SOUTH CONFERENCE DR. BOCA RATON FL 33486							
BOCA RATON F	FL 33486					DO NOT WRITE IN THIS SPACE			
	•					3. Date Incorporated or Qualifed			
	•					04/13/1972			
2 Principal Pi	lace of Business	2a. Mailing Address				4. FEI Number		TA	pplied For
<del>-</del>	lace of Business	26				59-1406193		h	ot Applicable
21		Suite, Apt. #, etc.				\$8.75 Additional			
22	<i>7</i> 1 0.01	27				5, Certifcate of Status D	esired	Fee R	Required
City & State	6	City & State				6. Election Campaign F	inancing	\$5.00	May Be
23		28				Trust Fund Contributi	ion		to Fees
Zip	Country	Zip Country .			•	8. This corporation owe	s the current year Ir	ntangible	_
24	25	29 30				Personal Property Ta		Yes	□No
	9. Name and Address of Current	Registered Agent				10. Name and Address	of New Registered	Agent	
			81	1 Nar	me				
TOB	ENER,W.H	÷*	82 Street Add			ss (P.O. Box Number is No	ot Acceptable)	-	
	SOUTH CONFERENCE DR	·4 ••				<u> </u>	<u> </u>	1 4000 TOP 40 100 20	
BOC	A RATON FL 33486		83	3		15. 建門等機制	福老和民國	(1) 10 mm (1) 10 mm	
•	• •	•	84	4 City		10.94 1014	# 1 5 (57 \$, 250) 340 9 (\$)	85 Zip	Code
	•			'			FI FI	<u> </u>	]
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State o	and 607.1508, Florida Statutes,	the abov	ve-nan	ned corpo	eration submits this statements	ent for the purpose of	of changing it	s registered registered
	egistered agent, or both, in the State of m familiar with, and accept the obligation				orporation	15 DOME OF GRECOIS. THE	eby accept the app	J	og.c.c.c.
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	gistered Age	ent signal	ture required	when reinstating)	DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGE	S TO OFFICERS A		
TITLE	PD	☐ DELETE	1.1 TITLE			100000000000000000000000000000000000000		Change	Addison
NAME	TOBENER,W H		1.2 NAME		1		•	•	
STREET ADDRESS	2051 S CONFERENCE DR		1.3 STREE	ET ADDR	ESS		•		
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-					☐ Change	Addition
TITLE	VD	☐ DELETE	2.1 TITLE					Change	Addition
NAME	LOTT SANDRA TOBENER		2.2 NAME						İ
STREET ADDRESS	10476 MATEO CT		2.3 STREE	ET ADDR	ESS		•		
CITY-ST-ZIP -==	BOCA RATON FL 33498		2.4 CITY						Addition
TITLE -577.5	SD	. DELETE	3.1 TITLE					☐ Change	Addition
NAME	TOBENER, VIRGINIA	, * · · · · · · · · · · · · · · · · · ·	3.2 NAME	Ē		. *	· · · · ·	•	
STREET ADDRESS	2051 S CONFERENCE DR		3.3 STRE	ET ADDR	ESS	1. 经产品 医克莱姆			3688386
CITY-ST-ZIP	BOCA RATON FL		3.4. CITY-		Щ.	4 2 1 1 1 1 1		1	Addition
TITLE	TD	☐ DELETE	4.1 TITLE				ាមាន ជន ជា ខែវិកីស៊ីវ	: Luchange	er Addition [
NAME AND ADDOC	TOBENER, VIRGINIA		4. 2 NAME	E			•		
STREET ADDRESS	2051 S CONFERENCE DR	it, and the	4.3 STRE	ET ADDR	ESS				
CITY-ST-ZIP	BOCA RATON FL	•	4.4 CITY-	ST-ZIP					
TITLE		☐ DELETE	5.1 TITLE					☐ Change	Addition
NAME			5.2 NAME			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	•		,
STREET ADDRESS	17:55		5.3 STRE		RESS	5,5			ł
CITY-ST-ZIP			5.4 CITY-		<del></del>				
TITLE	Andrew Control	☐ DELETE	6.1 TITLE					Change	B ☐ Addition
NAME	2071 SCALLER COLLEGE		6.2 NAME						
STREET ADDRESS	BOOK A HELLA		6.3 STRE	ET ADDR	ESS	•			

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.