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 # 441716

DOUGLA	S BUILDING CONTRACTOR	is, inc.							
Principal Place	of Business	Mailing Address					J11 01011 W		••••
6001 25TH AVE. NORTH 6001 25TH AVE. NORTH									
ST PETERSBURG FL 33710 ST PETERSBURG FL 33710						DO NOT WRITE IN THIS	CDACE		
						3. Date Incorporated or Qualifed	SFACE		
						12/13/1973			
2. Principal P	lace of Business	2a. Mailing Address	•			4. FEI Number		Applie	d For
21	_	26				59-1499457			pplicable
Suite, Apt.	#, etc.	- Suite, Apt. #; etc.				5. Certificate of Status Desired	•	5 Add	
22		27						e Requi	
City & Stat	e	City & State				6. Election Campaign Financing		00 ма	
23		28				Trust Fund Contribution	Add	led to F	ees
Zip	Country	Zip	Cor	untry		8. This corporation owes the current year Inte			
24	25	29	30			Personal Property Tax.	☐ Yes		No
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered	Agent		
LING	ELDACU IMPO E			81	Name				
LINGELBACH, JAMES E				82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
6001 25TH AVENUE, NORTH						<u></u>			
ST PETERSBURG, FL				83		•			ļ
3371	U	•		84	City		85	Zip Cod	le
				1	1	<u>FL</u>			
office or r agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligat	of Florida, Such change was a	ilithonze	o ov	the corporation	oration submits this statement for the purpose of n's board of directors. I hereby accept the appoin	itment a	s regist	ered
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE	: Registere	d Agen	t signature required	when reinstating) DATE			
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	S	☐ DELETE	1.1 T	TLE		•	Char	nge	☐ Addition }
NAME .	LINGELBACH, CHRISTINE C		1.2 N	IAME			•		1
STREET ADDRESS	6001 25TH AVENUE N.		1.3 S	TREET	TADDRESS				
CITY-ST-ZIP	ST PETERSBURG, FL 00000.		1.4 0	CITY-S	T-ZIP .	<u>'</u>			
TITLE	PD	☐ DELETE	2.1 T	TLE			Char	nge	Addition
NAME	LINGELBACH, JAMES E		2.2 N	IAME				•	
STREET ADDRESS	6001 25TH AVENUE N.		2.3 S	TREET	TADDRESS				ſ
CITY-ST-ZIP	ST PETERSBURG, FL 00000		2.40	CITY-S	ST-ZIP			- ^	-
TITLE	~ 1 (☐ DELETE	3.1 T	TILE			Chai	nge	Addition
NAME			3.2 N	IAME		•			i
STREET ADDRESS	,		3.3 \$	TREET	TADDRESS				ļ
CITY-ST-ZIP			3.4. 0	CITY-S	ST-ZIP	•			
TITLE		☐ DELETÉ		TTLE			☐ Cha	nge	Addition
NAME	. •			NAME					ļ
STREET ADDRESS					TADDRESS				
CITY-ST-ZIP				CITY-S					
TITLE		☐ DELETÉ	_	TILE	· -	-	☐ Cha	nge	Addition
NAME				IAME		•			
STREET ADDRESS			5.3 8	TREET	T ADDRESS				
OTTO OT THE			5.4 0	CITY-S	T-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 chapter 607, and that my name appears in the receiver of the corporation of t

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ DELETÉ

SIGNATURE:

TITLE

NAME

STREET ADDRESS

Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90133 010 ***150.00

☐ Change

Addition