

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

96 JAN 23 AM 10:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 450870 (1)

1. Corporation Name

CHANNELL CONSTRUCTION COMPANY, INC.



Principal Place of Business

Mailing Address

1040 OLIVE RD
SUITE 211
PENSACOLA FL 32514
US

P O BOX 8066
POST OFFICE BOX 8066
PENSACOLA FL 32505
US

3. Date Incorporated or Qualified
04/23/1974

3a. Date of Last Report
01/18/1995

2. Principal Place of Business

2a. Mailing Address

21 7 Seashore Dr.

26 Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Pensacola Beach, FL

28 City & State

24 32561

25 Esc.

29 Zip

30 Country

4. FEI Number

59-1530882

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CHANNELL, CHERYL N.
1040 OLIVE ROAD
APT. 211
PENSACOLA FL 32514

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

7 Seashore Dr.

83

84 Pensacola Beach

FL

85 Zip Code
32561

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME CHANNELL, DAVID M
STREET ADDRESS 1040 OLIVE RD., #211
CITY-ST-ZIP PENSACOLA FL

TITLE VS ☐ DELETE

NAME CHANNELL, CHERYL N
STREET ADDRESS 1040 OLIVE RD., APT. 211
CITY-ST-ZIP PENSACOLA FL

TITLE ☐ DELETE

NAME ☐ DELETE

NAME ☐ DELETE

NAME ☐ DELETE

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NAME ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

7 Seashore Dr.
Pensacola Beach, FL 32561

7 Seashore Dr.
Pensacola Beach FL 32561

500001707705
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****200.00 ****200.00

1-23-96 MS

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Cheryl Channell Cheryl Channell 1-18-96 904 478-4419

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (12/95)