

**CORPORATION
ANNUAL REPORT
1995**

Florida Department of Banking
and Finance
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 451213

(3)

1. Corporation Name

EATON CONSTRUCTION COMPANY

Principal Place of Business

**8150 PRESIDENTS DRIVE
ORLANDO FL 32809**

Mailing Address

**8150 PRESIDENTS DRIVE
ORLANDO FL 32809**

95 MAY -1 PM 12:12

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**100001491641
-05/17/95--01110--008
*****400.00 *****200.00**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

04/30/1974

3a. Date of Last Report

09/01/1994

4. FEI Number

59-1529380

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

**EATON, STEPHEN A.
1749 LEE JANZEN DRIVE
KISSIMMEE FL 34744**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME EATON, STEPHEN A.
STREET ADDRESS 1749 LEE JANZEN DRIVE
CITY - ST - ZIP KISSIMMEE FL

TITLE ST
NAME EATON, PAMELA
STREET ADDRESS 1749 LEE JANZEN DRIVE
CITY - ST - ZIP KISSIMMEE FL

TITLE VP
NAME EATON, HAROLD
STREET ADDRESS 1749 LEE JANZEN DRIVE
CITY - ST - ZIP KISSIMMEE FL

TITLE VP
NAME MCKAY, JOHN
STREET ADDRESS 7044 BAYSHORE DRIVE
CITY - ST - ZIP ST. CLOUD FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1 TITLE
2 NAME
3 STREET ADDRESS
4 CITY - ST - ZIP

☐ Change ☐ Addition

2 TITLE
2 NAME
3 STREET ADDRESS
4 CITY - ST - ZIP

☐ Change ☐ Addition

3 TITLE
3 NAME
3 STREET ADDRESS
4 CITY - ST - ZIP

☐ Change ☐ Addition

4 TITLE
4 NAME
4 STREET ADDRESS
4 CITY - ST - ZIP

☐ Change ☐ Addition

5 TITLE
5 NAME
5 STREET ADDRESS
5 CITY - ST - ZIP

☐ Change ☐ Addition

6 TITLE
6 NAME
6 STREET ADDRESS
6 CITY - ST - ZIP

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 110.07(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 *Signature* **STEPHEN A. EATON** **PRESIDENT**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/95

401-055-9109