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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # 469112

1. Corporation Name

**(7)** 

**FDENFIELD CONTRACTING COMPANY, INC.** 

## FILED Feb 13 1997 8:00am Secretary of State

Principal Place of Business Mailing Address  607 E. SANDPIPER ROAD APOPKA FL 32712  Mailing Address  607 E. SANDPIPER ROAD APOPKA FL 32712-2903					<del></del>				
						3. Date Incorporated or Qualified 02/07/1975	3a. Date of La 02/22/19	•	
2. Principal P	├ <b>─</b> ┐	2a. Mailing Address			4. FEI Number Applied For				
21 Cuita Ant	# ata	26 Suite Apt	# oto			59-1573514	***	Not Applicable 75 Additional	
Suite, Apt.	#, etc.	<u> </u>	Suite, Apt. #, etc			5. Certificate of Status Desired	T	e Required	
City & State	9		City & State			6. Election Campaign Financing		.00 May Be	
23		28				Trust Fund Contribution		ded to Fees	
Zip	Zip Country		Zip Cou			8. This corporation has liability for intangible tax		der s. 199.032,	
24	25	29	3	30		Florida Statutes	Yes No		
	9. Name and Address of (	Current Registered Agent				10. Name and Address of New Re	pistered Agent		
	NFIELD, RONALD H.			81	Name				
	E. SANDPIPER ROAD			82	Street Add	lress (P.O. Box Number is Not Acceptab	le)		
APC	OPKA FL 32712			83			<del></del>		
				03					
				84	City		FL 85	Zip Code	
office or r agent. I a SIGNATURE	egistered agent, or both, in the m familiar with, and accept the Signature typed or proted name of regist	e State of Florida Such cha e obligations of, Section 60 lered agent and tile 1 applicable.	ange was au 7.0505, Flori	ithorized by ida Statutes Hegislered Age	the corpora s.	poration submits this statement for the p tion's board of directors. I hereby accep- lired when reinstating)	DATE.	nt as registered	
12.	PD	RS AND DIRECTORS	DELETE	13.		ADDITIONS/CHANGES TO OFFIC	Cha		
11TLE NAME	EDENFIELD, RONALD H		VELETE	1.1 MAME			L.J Gild	rige	
STREET ADDRESS	607 E. SANDPIPER ROA			1.2 NAME	ATITURESS				
CITY-ST-ZIP	APOPKA FL			1.4 CITY - S					
TITLE	VO		DELETE	2111116			Cha	ange Addition	
NAME	EDENFIELD, NANCY L.			22 NAME	•				
STREET ADDRESS	607 E. SANDPIPER ROA	D .		23 STREET	ADDRESS			!	
CITY ST-ZIP	APOPKA FL			2 4 CITY-1	ST - ZIP				
TITLE	ST		DELETE	3 1 TITLE			☐ Cha	ange 🔲 Addilion	
NAME	EDENFIELD, NANCY L.			32 NAME					
STREET ADDRESS	607 E. SANDPIPER ROA	W		3 3 STREET				İ	
CITY-ST-ZIP	APOPKA FL	· · · · · · · · · · · · · · · · · · ·	DELETE	3.4. CITY- :	ST-ZIP			ngg Addise	
TITLE		L	DELETE	4.1 TITLE			L Cha	ange L Addition	
NAME				4. 2 NAME	ADODEDO			j	
STREET ADDRESS				4.3 STREET	1				
CITY - ST - ZIP TITLE		R	DELETE	4.4 CITY - S 5.1 TITLE	1-217		Cha	ange Addition	
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREET	ADDRESS				
CITY-ST-ZIP				5.4 CITY - S					
TITLE			DELETE	6.1 TITLE			Cha	ange Addition	
NAME		_		6.2 NAME			_	-	
STREET ADORESS				6.3 STREET	ADDRESS				
CITY - S1 - ZIP				6.4 CITY - S					
	by certify that the information s	unnlied with this filing doe	s not qualify	_		d in Section 119 07/3)(i). Florida Statute	s. I further certify	that the	

14. I do 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 planged, or on an attachment with an address.