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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 469112

EDENFIELD CONTRACTING COMPANY, INC.

| Principal Place of Business Mailing Address | | | | | חום נפנו מוסוו זמטוו ופוטו מוווס פזמוס זווספו ו | ום וגמום וופגם ווקום וו | . 011 BURUL 1881 |
|---|--|---------------------------------------|------------------------|------------------|---|-------------------------|-------------------------|
| 607 E. SANDPIPER ROAD 607 E. SANDPIPE | | 607 E. SANDPIPER ROAD | OAD | | | | |
| APOPKA FL 32712 APOPKA FL 32 | | APOPKA FL 32712 | | | DO NOT WRITE IN THIS SPACE | | |
| | | | | | 3. Date Incorporated or Qualifed | | |
| | | | | | 02/07/1975 | | ĺ |
| 2. Principal P | lace of Business | 2a. Mailing Address | | | 4. FEI Number | Apr | olied For |
| 21 | | 26 | | | 59-1573514 | Not | Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | \$8.75 A | dditional |
| 22 | | 27 | | | 3. Certificate of Status Desired | Fee Rec | quired |
| City & State | e | City & State | | | 6. Election Campaign Financing | \$5.00 | |
| 23 | | 28 | | | Trust Fund Contribution | Added to | > Fees |
| Zip | Country | Zip | Country ⊒ | | 8. This corporation owes the current year | | ₽No |
| 24 | 25 | 29 30 | 0 | · | Personal Property Tax. 10. Name and Address of New Registers | | |
| | 9. Name and Address of Currer | it Kedistered Agent | 81 | Name | TO. Marile and Address of New Magneton | | |
| EDE | NFIELD, RONALD H. | | L | | | | |
| 607 E. SANDPIPER ROAD | | | 82 | Street A | ddress (P.O. Box Number is Not Acceptable) | | |
| | PKA FL 32712 | | 83 | | | | |
| | | | | | | Top C 750 C | <u> </u> |
| | | | 84 | City | F | E 85 Zip C | ode |
| 11. Pursuant | to the provisions of Sections 607.050 | 2 and 607.1508, Florida Statutes | , the above | e-named c | corporation submits this statement for the purpose | of changing its | registered |
| office or r | egistered agent, or both, in the State m familiar with, and accept the obliga | of Florida. Such change was auth | norized by | the corpor | ration's board of directors. I hereby accept the ap | ontment as reg | listered |
| SIGNATURE | The state of the s | | | | | | |
| SIGNATURE | Signature, typed or printed name of registered age | nt and title if applicable. (NOTE: Re | | nt signature rec | quired when reinstating) DATE | | |
| 12. | | ID DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFICERS | | RS IN 12 |
| TITLE | | | 1.1 TITLE | 1 | | Change | |
| NAME | EDENFIELD, RONALD H. | | 1,2 NAME | | | | ļ |
| STREET ADDRESS | 607 E. SANDPIPER ROAD | | | TADDRESS | | | |
| CITY-ST-ZIP | | | 14 CITY-S 2.1 TITLE | T-ZIP | | Change | Addition |
| TITLE | | | 22 NAME | - 1 | | | |
| NAME | EDENFIELD, NANCY L. 607 E. SANDPIPER ROAD | | 2.3 STREE | FADDDESS | | | Ì |
| STREET ADDRESS | APOPKA FL | | 2.4 CITY-S | | | | ļ |
| CITY-ST-ZIP TITLE | | | 3.1 TITLE | 51-ZIF | | ☐ Change | Addition |
| NAME | | | 3.2 NAME | | | | { |
| STREET ADDRESS | 607 E. SANDPIPER ROAD | | 3.3 STREE | r address | | | |
| CITY-ST-ZIP. | APOPKA.FL | | . 3.4. CITY=5 | T-ZIP | | | |
| TITLE | | | 4.1 TITLE | | | ☐ Change | ☐ Addition |
| NAME | | | 4 2 NAME | } | | | Ì |
| STREET ADDRESS | la constant de la con | | 4.3 STREE | T ADDRESS | | | ł |
| CITY-ST-ZIP | | | 4.4 CITY-S | T-ZIP | <u> </u> | | |
| TITLE | | ☐ DELETE | 5.1 TITLE | } | | Change | ☐ Addition |
| NAME | | | 5.2 NAME | 1 | | | ľ |
| STREET ADDRESS | | | 1 | T ADDRESS | | | \ |
| CITY-ST-ZIP | | | 5.4 CITY-S | T-ZIP | · | | T A diese |
| TITLE | | □ DELETE | 6.1 TITLE | ì | | Change | ☐ Addition |

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.

2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIG