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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 481862

(1)

**DEMING CONSTRUCTION COMPANY, INC.** 

Principal Place of Business

Mailing Address

1231 13TH ST NW WINTER HAVEN FL \$3881 1231 13TH ST NW

WINTER HAVEN FL 33881-3112

## FILED Jun 19 1997 8:00am Secretary of State



									3. Date Incorporated or Qualified 3a. Date of Last Report 07/21/1975 04/09/1996				
2. Principal P	lace of Busin	0SS	2a. 1	2a. Mailing Address					4. FEt Number			pplied For	
21			26	26				- 1	59-1622345			ot Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				t			\$8.75	Additional	
22				27					5. Certificate of Status Desired	L-J	Fee F	equired	
1 City & State				City & State					6. Election Campaign Financing		\$5.00	May Be	
23				28					Trust Fund Contribution		Added	to Fees	
Zip	Country Zip				Country				8. This corporation has liability for intangible tax under s. 199.032,				
24	25   29   30 9. Name and Address of Current Registered Agent								Florida Statutes XYes No				
·		nt Registe	ered Agent		81	10. Name and Address of New Registered Agent							
DEMING CHAS F							Name						
1231 13TH ST NW WINTER HAVEN FL 33881						82	82 Street Address (P.O. Box Number is Not Acceptable)						
						83							
							City	City B5 Zip				Code	
<u>, </u>										FL			
11. Pursuant	to the provisi- registered agr	ons of Sections 607.05 ant, or hotbin the Stat	02 and 607	7.1508, Florida Statut 3. Such change was i	ies, the al	bove d by	e-named	corpor	ation submits this statement for the problem of the problem of directors. I hereby acceptance in the problem is the problem of	rpose of	changing	its registered	
agent. I a	ım familiar wij	h, an accept the obli	gations of,	Section 607.0505, Fk	orida Stat	utes	3.	50.010	ation submits this statement for the pi n's board of directors. I hereby accep	тио арр	5.1. N. 110171 G.	, . <b>D</b> g.10.1010	
SIGNATURE			m	eg/									
	Signature, typed	or printed harne of registered a				d Age	nt signature	required	when reinstating)	DATE.			
12.	PD	OFFICERS A	ND DIRECT		13.			r	ADDITIONS/CHANGES TO OFFICE	ERS AND	-	RS IN 12 Addition	
TITLE		NIAC E		☐ DELETE	1.1 Ti						L] Change	Aborion	
NAME	DEMING,				1.2 NAME								
STREET ADDRESS	1231 13Th						ADDRESS					Í	
CITY-ST-ZIP	WINTER HAVEN, FL 00000			T oc. exc		1.4 C(TY-ST-Z(P					T		
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NAME	DEMING,						2.2 NAME						
STREET ADDRESS	1231 1317						2.3 STREET ADDRESS						
CITY+ST-ZIP	MINIEK H	AVEN, FL 00000				2. 4 CITY-ST-ZIP						T Address	
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TITLE				DELETE	5.1 TI		J				Change	☐ Addition	
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STREET ADDRESS							ADDRESS						
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TITLE				☐ DELETE	6 1 TF	TLE					☐ Change	Addition	
NAME	1				62 N	4ME	ŀ	-					
STREET ADDRESS					6.3 S1	REET	ADDRESS						
CITY-ST-ZIP					6.4 CI	TY-S	T-ZIP	<u>L</u>					

4. 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 changed, or on an attachment with an address.

ICHATURE, CHE HIGNASURI CHETINAM IN A 1/1/ 107 941-192-1744