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

PROFIT **CORPORATION ANNUAL REPORT**



Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998 DOCUMENT #

(5)

CONWAY CONSTRUCTION COMPANY OF PALATKA, INC.

Principal Place of Business

CONWAY CONSTRUCTION CO OF PALATKA, INC.

Mailing Address

CONWAY CONSTRUCTION CO OF PALATKA, INC.

FILED Apr 08 1998 8:00am Secretary of State



100 N- 200 307 Main 37 PALATKA FL 321772005 3 719		1 89 N. 2ND - 307 Main Sナ PALATKA FL 32177- 388 6			6	DO NOT WRITE IN THIS SPACE			
	32179- ** /	32177-37/9				3. Date Incorporated or Qualified 12/17/1976			
	lace of Business	2a. Mailing Address	•			4. FEI Number	A	pplied For	
21		26				59-1708183	N	lot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired Security Securi			
City & State	9	City & State				Election Campaign Financing Trust Fund Contribution		May Be	
Zip	Country	Ζιρ	Cou	untry	,	8. This corporation owes or has paid the curre			
24	25	29	30					□ No	
	g. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered A	gent		
MIL	ler, twila c.			81	Name				
	8. 15TH STREET			82	Street Ad	Idress (P.O. Box Number is Not Acceptable)			
PAI	ATKA FL 32077			62	Street Au	adress (P.O. Box Number is Not Acceptable)			
				83					
					0:		11 -		
				84	City	FL.	85 Zip	Code	
agent. I a	to the provisions of Sections 607.056 egistored agent, or both, in the State or familiar with, and accept the oblig	02 and 607.1508, Florida Statu of Florida, Such change was gations of, Section 607.0505, F	utes, the a s authorize Florida Sta	bove id by tutes	the corpor	orporation submits this statement for the purpose of ration's board of directors. I hereby accept the appo	changing intment a	its registered s registered	
SIGNATURE	Signature, typed or printed name of registered au	ent and tille if apple able (NC	OTE: Registere	d Age	oni signature rec	quired when reinstating) DATE			
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12	
TITLE	VD	☐ DELETE	1.1 1	ITLE			Change	Addition	
NAME	KNIGHT, GLENDA C		1.2 N	AME					
STREET ADDRESS	4111 BARRET		1.3 \$	TREET	ADDRESS	,			
CITY-ST-ZIP	PLANT CITY FL		1.4 0	ITY-S	T- ZIP	No.			
TITLE	STD	☐ DELETE	2.1 T	ITLE		7	Change	Addition	
NAME	MILLER, TWILA C		22 N	AME					
STREET ADDRESS	802 SOUTH 15TH STREET		2.3 \$	TREET	ADDRESS				
CITY-ST-ZIP	PALATKA, FL 00000		2.40	CITY-S	ST-ZIP				
TITLE	PO	DELETE.	3.1 T	ITLE			Change	Addition	
NAME	SCHMIDT, GLORIA C.		3.2 N	AME					
STREET ADDRESS	4444 NORTH 47TH ST.		3.3 \$	TREET	ADDRESS				
CITY-ST-ZIP	PHOENIX AZ		3.4. 0	CITY-S	ST-ZIP				
TITLE		☐ DELETE	4.1 T	TLE			Change	Addition	
NAME			4.21	NAME					
STREET ADDRESS			4.3 S	TREET	ADDRESS				
CITY-ST-ZIP			4.4 C	ΠY-\$	T- ZIP				
TULE		☐ DELETE	5.1 T	ITLE			Change	☐ Addition	
NAME			5.2 N	AME					
STREET ADDRESS			5.3 S	TREET	ADDRESS				
CITY-ST-ZIP				ITY-S	T-ZIP				
TOLE		☐ DELETE	61 T	TLE			Change	Addition	
NAME			6.2 N	AME					
STREET ADDRESS			6.3 S	TREET	ADDRESS				
CITY-ST-ZIP			64C	ITY-S	T-ZIP				

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 roport 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.

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