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

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name

DOCUMENT # 532362



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90252 036 ***150.00

DOOLEY AND MACK CONSTRUCTORS, INC. A LOURING OFFICE FIRE TIMES THE OFFICE HIS STATE OF STATE

Principal Place	of Business	Mailing Address)1 4 1811 91911 91911	4(6)1 a1611 1891	
2750 STICKNEY PT. RD. STE. 201 2750 STICKNEY PT. RD. STE. SARASOTA FL 34231 SARASOTA FL 34231			201			DO NOT WRITE IN TH	IIS SPACE		
						3. Date Incorporated or Qualifed 04/26/1977			
Principal Place of Business 2a. Mailing Address						4. FEI Number	A	pplied For	
21						59-1739228		ot Applicable	
Suite, Apt. 1	#, etc.	Suite, Apt. #, etc.			<u></u>	5. Certificate of Status Desired Sa.75 Additional Fee Required			
City & State	•	City & State	City & State			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
Zip	Country	Zip Co	untry		8. This corporation owes the cu				
24	25	25 29 30			Personal Property Tax.				
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent			
DANIEL LINE LANGE (TAALUDE)				81 Name					
DOOLEY, WILLIAM A. (ESQUIRE) 2070 RINGLING BOULEVARD			82	Street	Addre	ss (P.O. Box Number is Not Acceptable)			
SARA	ASOTA FL 34237		83						
			84	City			. 85 Zip	Code	
				'		<u>_</u>	'L		
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 reinstating) DATE									
	Signature, typed or printed name of registered agen			nt signature i	required :	ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN 12	
12.	OFFICERS AN		1.1 TITLE		VD	ADDITIONS/OFFICE TO OFFICE NO	☐ Change		
	DOOLEY, WILLIAM R		1.2 NAME			Varia Langano			
NAME STREET ADDRESS	5161 FLICKER FIELD CIR			TADDRESS		Kevin Lapanne 66 Shadow Pine Way]	
	SARASOTA FL		1.4 CITY-ST-		Sar	casota, Florida 34238		Ì	
CITY-ST-ZIP	STD		TITLE	1-24	STI		X Change	☐ Addition	
NAME	MACK, WENDY L.		NAME			ndý L. Máck			
STREET ADDRESS	2401 ADAGIO WAY			TADORESS		36 Carmilfra Way			
CITY-ST-ZIP	SARASOTA FL		CITY-S	_{J-ZIP} Sar		rasota, Florida 34231			
TITLE	PD		TITLE		VD		KX Change	☐ Addition	
NAME	SMITH, KENNETH D	3.2	NAME			air C. Getz			
STREET ADDRESS	2221 SHADOWWOOD LN	3.3	STREE	TADDRESS				}	
CITY-ST-ZIP	SARASOTA FL	3.4	CITY-S	ST-ZIP	<u> </u>			-	
TITLE	VD	₩ DELETE 4.1	4.1 TITLE		VD		Change	■ Addition	
NAME	MULLIGAN, RICHARD		4. 2 NAME		1	chael M. Dooley		1	
STREET ADDRESS	3625 WHITE SULPHER PL	4.3	4.3 STREET ADDRES			Gillespie Drive			
CITY-ST-ZIP	SARASOTA FL	 +	4,4 CITY-ST-Z		-	anklin, TN 37067		TV) A dates	
TITLE	VD		5.1 TITLE		VD		Change		
NAME	LAY, RONALD L		5.2 NAME			chael A. Bruner			
STREET ADDRESS	3003 GARRIOTT LN		5.3 STREET			37 Sea Pines Way			
CITY-ST-ZIP	SARASOTA FL		CITY-S	II-ZIP	UO:	ral Springs, FL 33071	Change	Addition	
TITLE	VD	□ b122,2					- Cuange		
NAME	OLIO, DEAN		NAME STREET ADDRESS					- (
STREET ADDRESS	ss 201 MILLRUN EAST 63		STREE) ADDRESS				ļ	

BRANDENTON FL 34202

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.

SIGNATURE:

Wendy L. Mack, Sec./Treas. 2/10/99 (941)921-4636

Daytime Phone #