

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **537917** (7)

1. Corporation Name

C.A. BEDDOW CONSTRUCTION COMPANY



Principal Place of Business

**310 47TH ST., N.W.
BRADENTON FL 34209**

Mailing Address

**310 47TH ST., N.W.
BRADENTON FL 34209**

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**BEDDOW, C.A.
310 47TH ST., N.W.
BRADENTON FL 34209**

3. Date Incorporated or Qualified
06/24/1977

3a. Date of Last Report
01/17/1995

4. FEI Number
59-1791506

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 193.032,
Florida Statutes. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Secretary of State

DATE

12. OFFICERS AND DIRECTORS

TITLE	VS	☐ DELETE
NAME	BEDDOW, SANDRA C.	
STREET ADDRESS	310 47TH ST., N.W.	
CITY-ST-ZIP	BRADENTON FL	
TITLE	PT	☐ DELETE
NAME	BEDDOW, C.A.	
STREET ADDRESS	310 47TH ST. NW	
CITY-ST-ZIP	BRADENTON FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	☐ Change ☐ Addition
15 TITLE	
16 NAME	
17 STREET ADDRESS	
18 CITY-ST-ZIP	☐ Change ☐ Addition
19 TITLE	
20 NAME	
21 STREET ADDRESS	
22 CITY-ST-ZIP	☐ Change ☐ Addition
23 TITLE	
24 NAME	
25 STREET ADDRESS	
26 CITY-ST-ZIP	☐ Change ☐ Addition
27 TITLE	
28 NAME	
29 STREET ADDRESS	
30 CITY-ST-ZIP	☐ Change ☐ Addition
31 TITLE	
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	☐ Change ☐ Addition
35 TITLE	
36 NAME	
37 STREET ADDRESS	
38 CITY-ST-ZIP	☐ Change ☐ Addition
39 TITLE	
40 NAME	
41 STREET ADDRESS	
42 CITY-ST-ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this report is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(4)(b), Florida Statutes. I further certify that the information reflected on this report is a true and correct copy of the supplemental annual report as true and correct, 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, and that I am authorized, empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Book 12 or Book 13 if changed, in an attachment with my address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/23/96

747-0240

CR2E034 (12/95)