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

**PROFIT** 

SIGNATURE James & Pelker

May 07 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #** 541660 (7) PELKEY BUILDERS, INC. Principal Place of Business Mailing Address 1887 BEACH AVE. 1887 BEACH AVE. P O BOX 72 P O BOX 72 DO NOT WRITE IN THIS SPACE ATLANTIC BCH. FL 32233 ATLANTIC BCH. FL 32233 3. Date Incorporated or Qualified 07/27/1977 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1765458 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apl. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Žιρ Country Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. X Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 PELKEY, JAMES L. 1887 BEACH AVE. 82 Street Address (P.O. Box Number is Not Acceptable) ATLANTIC BCH. FL 32233 83 84 City 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. 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 agrint and title if applicable (NOTE: Registered Agent algusture required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE Change Addition TETLE PELKEY, LISA 8 1887 BEACH AVE STREET ADDRESS 1.3 STREET ADDRESS ATLANTIC BCH. FL CITY-ST-ZIP 1.4 CITY - ST-ZIP VID DELETE Change Addition TITLE 2.1 TITLE PELKEY, LISA S NAME 2.2 NAME 1887 BEACH AVE. STREET ADDRESS 2.3 STREET ADDRESS ATLANTIC BCH. FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE PELKEY, JAMES L NAME 3.2 NAME 1887 BEACH AVE. STREET ADDRESS 3.3 STREET ADDRESS ATLANTIC BCH. FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP DÉLÉTE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADORESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. Thereby 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 corpovation 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. James L. Pelkey Mesident

**FILED** 

904)246-8659