## 5-12-98 B 7125 C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED **PROFIT** May 12 1998 8:00am ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State **19**98 DIVISION OF CORPORATIONS DOCUMENT # 560282 (6)**BONTRAGER CONSTRUCTION, INC.** Principal Place of Business Mailing Address 980 CATTLEMEN RD. 980 CATTLEMEN RD. SARASOTA FL 34232 SARASOTA FL 34232 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/23/1978 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-1796400 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name BONTRAGER, DENNIS W. 4569 FOREST WOOD TR **B2** Street Address (P.O. Box Number is Not Acceptable) SARASOTA 34241 83 Bontrager, Dennis W 8489 Eagle Preserve Way 84 City Sarasota, FL 34241 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 tilloif applicable. (NOTE Registered Agent signature required when reinstating 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE A Change Addition TITLE 1.1 TITLE PD **BONTRAGER, DENNIS** NAME 1.2 NAME Bontrayer, Dennis 4569 FOREST WOOD TR 8489 Eagle Preserve Way Sarasota, FL 34241 STREET ADDRESS 1.3 STREET ADDRESS **Sar**asota Fl CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE  $\overline{\mathtt{ST}}$ TITLE 2.1 TITLE X Change Addition Bontrayer, Alice 8489 Eagle Preserve Way Sarasota, FL 34241 **BONTRAGER, ALICE** NAME 2.2 NAME 4569 FOREST WOOD TR STREET ADDRESS 2.3 STREET ADDRESS **SARASOTA FL** CITY-ST-ZIP 2 4 City-ST-ZIP DELETE Vice PD TITLE 3 1 TITLE Change X Addition Dobbins, Howard 6728 3rd St. Ct. W NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS Bradenton, FL 34207 CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Vice PD TITLE Change Addition 4.1 TITLE Steiner, John 4524 3rd Ave. Drive E NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS Bradenton, FL 34208 CITY-ST-ZIP 4.4 CITY - ST - ZIP Change ☐ DELETE TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETÉ TITLE 6.1 TITLE Change Addition

64 CITY-ST-ZIP 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 of 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 consortion or the received or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the co Hment with an address.

6.2 NAME

NAME

STREET ADDRESS

CITY-ST-ZIP

6.3 STREET ADDRESS