Applied For

\$8.75 Additional

Fee Required

Not Applicable

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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 DOCUMENT # 560282

1. Corporation Name

2. Principal Place of Business

Suite, Apt. #, etc.

PONTRAGER CONSTRUCTION INC

iling Address
CATTLEMEN RD. ASOTA FL 34232

2a. Mailing Address

Suite, Apt. #, etc.

26

27

Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90041 016 ***150.00

	DO NOT WRITE IN THIS SPACE
3.	Date Incorporated or Qualifed

4. FEI Number

59-1796400

5. Certificate of Status Desired

City & State	3	City & State			= 6. Election Campaign Financing	ا:5.00°\$ 	√ay-Be
23		28			Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Countr	у	8. This corporation owes the curren		_
24	25	29	30		Personal Property Tax.		□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Agent	
			8	1 Name			
	TRAGER, DENNIS W.		82	2 Street Add	ress (P.O. Box Number is Not Acceptable	le)	
	EAGLE PRESERVE WAY		Ĺ				
SAR	ASOTA 34241		8:	3			
			84	4 City		85 Zip C	ode
			[1		FL	
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State or familiar with, and accept the obligation	f Florida. Such change was	s authorized b	v tne corborati	poration submits this statement for the puion's board of directors. I hereby accept	urpose of changing its rethe appointment as reg	egistered istered
SIGNATURE						DATE	
	Signature, typed or printed name of registered agent			ent signature requir	ed when reinstating) ADDITIONS/CHANGES TO OFFI		RS IN 12
12.	OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTOR	☐ Additi
TITLE	PD	ال محدداد	1.7 TILE	į			
NAME							
STREET ADDRESS	8489 EAAGLE PRESERVE WAY			ET ADDRESS			
CITY-ST-ZIP	SARASOTA FL 34241	DELETE	1.4 CITY- 2.1 TITLE			Change	☐ Additi
TITLE	ST PONTRACED ALICE		2.1 HISE 2.2 NAME				
NAME	BONTRAGER, ALICE 8489 EAGLE PRESERVE WAY			ET ADDRESS			
STREET ADDRESS							
CITY-ST-ZIP	SARASOTA FL 3241	∏ DELETE	2,4 CITY			Change	Additi
TITLE	· · · •	- Pereie					_
NAME	DOBBINS, HOWARD 6728 3RD ST. CT. W		3.2 NAME	į į			
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP	BRADENTON FL 34207 VPD	☐ DELETE	3.4. CITY- 4.1 TITLE			["] Change	Additi
TITLE	- · · · -		4.1 IJILE 4.2 NAM				_
NAME	STEINER, JOHN			ET ADDRESS			
STREET ADDRESS	4524 3RD AVE. DR. E BRADENTON FL 34208						
CITY-ST-ZIP	PRADENTON FL 34200	☐ DELETE	4.4 C/TY- 5.1 T/TLE			Change	☐ Additi
πιε		_ peere	5.1 TILE		•		_
NAME				ET ADDRESS			
STREET ADDRESS			5.4 CITY-				
CITY-ST-ZIP		DELETE				Change	☐ Additi
TITLE			6.2 NAME				_
NAME				ET ADDRESS			
PERFECT ADDRESS			■ 0.3 31 NZ				

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 approach; 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 officer or director of the corpo

6.4 C/TY-ST-ZiP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP