Mailing Address

P.O. BOX 10296



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 573304

1. Corporation Name

Principal Place of Business

17000 REFLINE HIGHWAY

OENBRINK CONSTRUCTION COMPANY, INC.

JUPITER FL 334	FL 33458 RIVIERA BCH FL 33419-0296 US				DO NOT WRITE IN TURE S	DACE	
uș					DO NOT WRITE IN THIS SPACE		
					3. Date incorporated or Qualifed		1
		· · · · · · · · · · · · · · · · · · ·			05/23/1978		
2. Principal Pl	. Principal Place of Business 2a. Mailing Address				4. FEI Number		optied For
21	26				59-1822730		iot Applicable
Suite, Apt.	uite, Apt. #, etc. Suite, Apt. #, etc.			·	5. Certificate of Status Desired See Required Fee Fee Required Fee Required Fee Required Fee Fee Required Fee Fee Fee Required Fee Fee Fee Fee Fee Fee Fee Fee Fee F		
City & State City & State					6. Election Campaign Financing	\$5.00	May Be
28				-	Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year Intangible		
24	25	29 30			Personal Property Tax. X Yes □ No		
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered A	gent	
•			81	Name			-
OENBRINK, AUGUST H JR			-	0: 441	Jane (D.O. Day N. separato Not Assentable)		i
17000 BEELINE HIGHWAY			82	Street Add	dress (P.O. Box Number is Not Acceptable)		
JUPITER FL 33458			83				
					<i>*</i>		
			84	City	FL	85 Zip	Code
	4. 4b	and CO7 1509 Elorida Statutos	the above	named cal	· · · · · · · · · · · · · · · · · · ·	hanging it	s registered
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 a	m familiar with, and accept the obligation	ns of, Section 607.0505, Florida	a Statutes				
SIGNATURE					DATE		\
	Signature, typed or printed name of registered agent a			t signature requi	ADDITIONS/CHANGES TO OFFICERS AND	DIPECT	OPS IN 12
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND	☐ Change	
TITLE	SDT	☐ DELETE	1.1 TITLE			Change	
NAME	OENBRINK, AUGUST H JR		1.2 NAME				
STREET ADDRESS	17000 BEELINE HIGHWAY		1.3 STREE	ADDRESS			J
CITY-ST-ZIP	Jupiter FL		1.4 CITY-S	T-ZIP			
TITLE	DP □ DELETE		2.1 TITLE	Ì		☐ Change	Addition
NAME	oenbrink, august H. III		2.2 NAME				1
STREET ADDRESS	17000 BEELINE HIGHWAY		2.3 STREE	ADDRESS			ŀ
CITY-ST-ZIP	JUPITER FL 33458		2.4 CITY-5	T-ZIP	mi		-
TITLE		☐ DELETE	3.1 TITLE			☐ Change	Addition
NAME			3.2 NAME				
	1		l.	FADDRESS			<u>{</u>
STREET ADDRESS		!					}
CITY-ST-ZIP		☐ DELETE	3.4. CITY-S 4.1 TITLE	11-411		[] Change	Addition
TITLE	l	CT OCCUS					_
NAME			4. 2 NAME				
STREET ADDRESS				TADORESS			ļ
CITY-ST-ZIP			4.4 CITY-S	T-ZIP		П Съ	Addition
TITLE 1		☐ DELETE	5.1 TITLE			☐ Change	, האינוייייייייייייייייייייייייייייייייייי
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	T ADDRESS			
C/TY-ST-Z/P			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	T ADDRESS			l

6.4 CITY-ST-ZIP 14. 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 eceiver 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 management.

04/16/99

796-1705

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90042 027 ***150.00