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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 585354 (4)
ROGER G. THOMAS GENERAL CONTRACTOR, INC.

**FILED** Mar 19 1998 8:00am Secretary of State

HOULT G. THOMAG GENEIAE CONTINCTON, MO.					
Principal Place of Business Mailing Address					ira monat mamu mama minite amma
1535 8 CYPRESS DR. 19000 LOXABATCHEE RIVER			R RD	}	
SO4 JUPITER FL 33458				DO MOT MIDITE IN TAIL	00405
JUPITER FL 33477 US US				DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified 09/06/1978	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 24 4	eeward Circle	26 24 Leeway	rd Circle	59-1852520	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	6	City & State		6. Election Campaign Financing	\$5.00 May Be
23 / C	Questa +1	28 Tequesta.	FI.	Trust Fund Contribution	Added to Fees
<sup>Zip</sup>	469 25 US	20 33469 3	Country 0 US	8. This corporation owes or has paid the co	
24 55	9. Name and Address of Current I		10 US	Personal Property Tax due June 30.  10. Name and Address of New Registered	Yes No
I TOMAN TOUCH					
JUPITER FL 33458				Idress (P.O. Box Number is Not Acceptable)	
83				H LEEWARD CIRCLE	<del></del>
			84 City	EQUESTA FI	85 Zip Code
11. Pursuant to the provisions of Sections 697 0502 and 607, 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its redistered office or registered ingent, about, 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 families with, and adopt the obligations of, Section 607,0505, Florida Statutes.					
office or r	egistered agent a both in the State	Florida. Such change was au	ithorized by the corpo	ration's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE Signature typed or printed name of registered agent and tilk of applicable (NOTE: Registered Agent signature required when refinishing)  DATE					
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	P	DELETE	1.1 TITLE		Change    Addition
NAME	THOMAS, ROGER G		1.2 NAME		
STREET ADDRESS	19000 LOXAHATCHEE RIVER			24 Leeward Circle	
CITY-ST-ZIP	JUPITER FL			TEQUESTA, FL 33469	- I
TITLE	THOMAS, JANICE	☐ DELETE	2.1 TITLE		Change Addition
NAME	19000 LOXAHATCHEE RIVER		2.2 NAME	an immiliant Cipalist	
STREET ADDRESS	JUPITER FL		2.3 STREET ADDRESS	24 LEEWARD CIRCLE TEQUESTA FL 33469	
CITY-ST-ZIP	JOTILMIL	DELETE		18 OL VESTA, 1-L 33469	Change Addition
TITLE		TT NETE IE	3.1 TITLE		CINING CINDROLL
NAME ATRICET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		,
STREET ADDRESS			1		
CITY-ST-ZIP TITLE		☐ DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TIPLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		}-
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14. I hereby o	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 of	ertify that the Information

Indicated on this annual report or supplemental annual roport 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 of the co

SIGNATURE: