

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 607314

(2)

1. Corporation Name  
MAYO CONTRACTING, INC.



Principal Place of Business  
5601 CAPE LEYTE DRIVE  
SARASOTA FL 34242

Mailing Address  
5601 CAPE LEYTE DRIVE  
SARASOTA FL 34242-1813

3. Date Incorporated or Qualified  
01/15/1979

3a. Date of Last Report  
02/29/1996

2. Principal Place of Business  
21 1632 S. Lakeshore Dr.  
Suite, Apt. #, etc.

2a. Mailing Address  
26 1632 S. Lakeshore Dr.  
Suite, Apt. #, etc.

4. FEI Number  
59-1871952  
Applied For  
Not Applicable

22

27

6. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

23 City & State  
Sarasota, FL

28 City & State  
Sarasota, FL

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24 Zip  
34231

29 Zip  
34231

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

25 Country  
Sarasota

30 Country  
Sarasota

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MAYO, HOWELL R. JR.  
5601 CAPE LEYTE DRIVE  
SARASOTA FL 33581

81 Name  
Mayo, Howell R., Jr.  
82 Street Address (P.O. Box Number is Not Acceptable)  
1632 S. Lakeshore Dr.  
83  
84 City  
Sarasota FL 85 Zip Code  
34231

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 Howell R. Mayo, Jr. HOWELL R. Mayo, Jr. 24 MAR 97  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	MAYO, HOWELL R	
STREET ADDRESS	5601 CAPE LEYTE DR	
CITY-ST-ZIP	SARASOTA, FL 00000	
TITLE	STD	<input checked="" type="checkbox"/> DELETE
NAME	MAYO, MADGE T	
STREET ADDRESS	5601 CAPE LEYTE DR	
CITY-ST-ZIP	SARASOTA, FL 00000	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Mayo, Howell R.	
1.3 STREET ADDRESS	1632 S. Lakeshore Dr.	
1.4 CITY-ST-ZIP	Sarasota, FL 34231	
2.1 TITLE	STD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Mayo, Madge T.	
2.3 STREET ADDRESS	1632 S. Lakeshore Dr.	
2.4 CITY-ST-ZIP	Sarasota, FL 34231	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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 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.

SIGNATURE Howell R. Mayo, Jr. 24 MAR 97 041-924-7119

CR2E034 (9/96)