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 # 621139

(5)

PECK CONSTRUCTION CO. OF BREVARD, INC.

Apr 27 1998 8:00am Secretary of State

FILED

Principal Place of Business Mailing Address								- 1 LLOFID BYING 11031 MODY MICOS MHIS TOM DIBIL BROKE STOLL DIBIN BIBIL BIBIL FOLL			
1818 COCO PLUM ST., NE P.O.BOX 100187 PALM BAY FL 32905-3308 US				1818 COCO PLUM ST., NE P.O.BOX 100187 PALM BAY FL 32805-3308 US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
9 Princip	at Place of Busine	2.	2a. Mailing Address				05/06/1979 4. FEI Number Applied For				
2. Principal Place of Business			├ ──¬	26				59-1902418	Not Applicable		
Suite, Apt. #, etc.				Suite, Apt. #, etc.				T			dditional
22			27					b. Certificate of States Desired		Fee Re	
City & 5				City & State				B. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip]	Country	29	Zφ	Country			8. This corporation owes or has paid the current year Intangible			
24	25 Same and Address of Current B			arad Agant	30]			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent			
9. Name and Address of Current Registered Agent							Name	10; realite mile Addition of them rioge	otorou ngo	•	
LAVISA, MAURICE R 1818 COCO PLUM ST., N.E.											
PALM BAY FL 32905							Street Addre	ress (P.O. Box Number is Not Acceptable)			
	TALM DATE	05900				83					
						84	City		85	Zip C	Code
						-	' '		FL	1 '	
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.											
SIGNATU	RE Signalure, typed	or printed name of registere	d agent and title	Lapplicable (N	OTE Register	ed Ag	ent signature require	ed when reinstaling)	DATE		
12.			AND DIREC	TORS	13.			ADDITIONS/CHANGES TO OFFICE			
TITLE	P			☐ DELETE	1.11	IITLE				Change	Addition
NAME		, MAURICE R				NAME					
STREET ADDR		DCO PLUM ST., N	I.E.				T ADDRESS				
CITY-ST-ZIP		AY, FL 00000		DELETE	_	CITY-! TITLE	ST-ZIP		——————————————————————————————————————	Change	Addition
TITLE	ST					NAME			L., \	indingo	
NAME STREET ADOR		N, LUCKLE DCO PLUM ST., N	3 E				T ADDRESS				
CITY-ST-ZIP		AY, FL 00000	1.6.				ST-ZIP				
TITLE	V	N111E 00000		DELETE		TITLE	U1 E1			Change	Addition
NAME	, ,	DONALD W.			3.21	NAME					
STREET ADDR		SBANE ST NE			3.3	STREE	T ADDRESS				
CITY - ST - ZIP	PALM BAY FL						ST-ZIP		·		
TITLE				☐ DELETE	4.1	TITLE	[Change	☐ Addition
NAME					4. 2	NAME					
STREET ADDR	ESS				1		T ADDRESS				
CITY-ST-ZIP				Devete			ST-ZIP	and trailed to the same		Change	Addition
TITLE				☐ DELETE		TITLE			, C.	u raviĝe	Addition
NAME						NAME					
STREET ADDR	199						T ADDRESS ST-ZIP				
CITY-ST-ZIP				DELETE		CITY-:	31-ZIF			Change	Addition
NAME						NAME				-	_
STREET ADDR	ess				1		T ADORESS				
CITY-ST-ZIP					i i		ST-ZIP				
14. I here	by certify that the	e information supplie	ed with this f	ling does not qualify				Section 119.07(3)(i), Florida Statutes. I fu	urther certify	hat 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 it made under oath; that I am an officer or director of the corporation or the roceiver 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 or an attachment with an address.

SIGNATURE:

4/21/98 407-723-3196