

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 639899 (4)

1. Corporation Name

CHAMPION CONSTRUCTION COMPANY, INC.



Principal Place of Business

13841 DARLENE AVE
HUDSON FL 34667

Mailing Address

13841 DARLENE AVE
HUDSON FL 34667

3. Date Incorporated or Qualified
10/17/1979

3a. Date of Last Report
05/10/1995

4. FEI Number

59-1952315

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

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

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip Country

28. Zip Country

24. Zip Country

29. Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GARRABRANTS, E L JR
6008 MAIN ST
NEW PT RICHEY FL 34653

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

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

Signature of principal officer of registered agent, if not applicable

INCORP. Registered Agent Signature required when reinstating

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

NAME MCMUNN, PERTHELLA

12 NAME

13841 DARLENE AVE

13 STREET ADDRESS

HUDSON, FL 00000

14 CITY-ST-ZIP

VPD

2.1 TITLE ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition

SIMON, DAVID

22 NAME

3472 AMBERJACK DR

23 STREET ADDRESS

SPRINGHILL, FL 00000

24 CITY-ST-ZIP

PD

3.1 TITLE ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition

MCMUNN, PATRICK J

32 NAME

13841 DARLENE AVE

33 STREET ADDRESS

HUDSON FL

34 CITY-ST-ZIP

☐ DELETE

4.1 TITLE ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME

42 NAME

STREET ADDRESS

43 STREET ADDRESS

CITY-ST-ZIP

44 CITY-ST-ZIP

☐ DELETE

5.1 TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME

52 NAME

STREET ADDRESS

53 STREET ADDRESS

CITY-ST-ZIP

54 CITY-ST-ZIP

☐ DELETE

6.1 TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME

62 NAME

STREET ADDRESS

63 STREET ADDRESS

CITY-ST-ZIP

64 CITY-ST-ZIP

☐ DELETE

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/26/96

813/863-7865

CR2E034 (12/95)