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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

642290

(1)

DFR CONSTRUCTION COMPANY, INC.

FILED
Jan 24 1997 8:00am
Secretary of State



Principal Place	e of Business	Mailing Address	Mailing Address						2.0		
2935 PORTER LITHIA FL 335		2935 PORTER RD. LITHIA FL 33547-2607									
						3.	Date Incorporated 10/19/1979	d or Qualified		te of Last 23/1996	
2. Principal P	lace of Business	2a. Mailing Addr	ess			4.	FEI Number		· · · · · · · · · · · · · · · · · · ·		Applied For
21		26					<u>59-1940212</u>				Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #.	Suite, Apt. #, etc.			5.	Certificate of State	us Desired	\$8.75 Additional Fee Required		
City & State 23	e	City & State		,		6.	Election Campaig Trust Fund Contril	•			May Be d to Fees
Zıp <b>24</b>	Country 25	Zıp <b>29</b>	30	ountry		8.	This corporation I		n <b>ia</b> ngible ( Yes		s. 199.032,
	9. Name and Address of Curr	ent Registered Agent				10.	Name and Addre	ss of New Re	gistered A	gent	
RED	FEARN, MARY ELLEN	***************************************		81	Name	· <del></del>			· · · · · ·		
293	5 PORTER ROAD HA FL 33547			82	Street	Address (P	P.O. Box Number is	Not Acceptab	le)		
				83							
				84	City					<b>85</b> Zi	p Code
	to the provisions of Sections 607.0								FL	1	
l office or r	egistered agent, or both, in the Sta m familiar with, and accept the obl Stgratine, typed or parted name of registered	ite of Florida. Such char igations of, Section 607.	ige was authori .0505, Florida S	zed by statutes	the co	rporation's t	board of directors.	I hereby accer	DATE	ineminic	as registered
12.		ND DIRECTORS	1				ADDITIONS/CHAN	GES TO OFFIC		DIRECTO	DRS IN 12
TITLE	PD	□ DI		1 TITLE		T				Changi	
NAME	REDFEARN, DAN FLOYD		1.3	2 NAME							
STREET ADDRESS	2935 PORTER ROAD		1.3	3 STREET	ADDRESS						
CITY-ST-ZIP	LITHIA FL		1.6	4 CITY - S	T-ZIP	1					
TITLE	STD	☐ D(	ELETÉ 2	1 TITLE						Change	Addition
NAME	REDFEARN, MARY ELLEN		2.3	2 name							
STREET ADDRESS	2935 PORTER ROAD		2.	3 STREET	address						
CITY - ST - ZIP	LITHIA FL			4 CITY-S	T-ZIP	ļ <u>.</u> .	<del></del>		<del></del>		
TITLE		D		1 TITLE						Change	e [] Addition
NAME				2 NAME							
STREET ADDRESS	6				ADDRESS						
CITY-ST-ZIP				4. CITY - S 1 TITLE	ST-ZIP	<del> </del>				Change	e
TITLE NAME		_ O		2 NAME						crony	ייין אייייייייייייייייייייייייייייייייי
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP				4 CITY-S							
TITLE	<u></u>	D		1 TITLE	. 6.11	<del>                                     </del>				☐ Chang	e Addition
NAME				2 NAME						_ •	
STREET ADDRESS					ADDRESS	İ					
CITY-ST-ZIP				4 CITY - S							
TITLE		D		1 TITLE		1				Chang	e Addition
NAME				2 NAME						-	
STREET ADDRESS			6	3 STREET	ADDRESS						
CITY-S1-ZIP				4 CITY - S							
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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: Mary Ellen Redfearn MARY Ellen Redfearn Signature and typed on Pringed Name of Signing Officer or Director

1/15/97

(8/3)737-4240