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

CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Jan 27 1998 8:00am Secretary of State

DOCUM 1. Corporation	MENT Name	# 64751	9	(8)								
SURETY CONSTRUCTION COMPANY												
OSHLI		THOU THOSE COMM 7	441						r 18 mars. Dei le manas 42 km a may ka tanan 1000 ki maa dat	its sinil tinii ti	111 B1011 (685	
Principal Place of Business Mailing Address										HIL DENSI WINDLES	BC1 81611 1881	
28441 S TAMIAMI TRAIL 28441 S TAMIAMI TRAIL												
SUITE 109	109	09										
Bonita Sprin US	NGS FL 34134		BONITA SPRINGS FL 34134 US					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
US						-			1			
2. Principal Pl	ace of Busin	229	1 2a Ma	2a. Mailing Address					12/07/1979 4. FEI Number		Applied For	-
21			⊢_	26					59-1951304		ot Applicable	,†
Suite, Apt.	#, etc.			Suite, Apt. #, etc.							Additional	7
22			27	27					5. Certificate of Status Desired		Required	1
City & State	•	Cit	City & State					6. Election Campaign Financing	\$5.00	May Be	٦	
23			28						Trust Fund Contribution	Added	d to Fees	_
Zip	-	Country	— ·	Zip Cou					8. This corporation owes or has paid the o			
24	25			29 30					Personal Property Tax due June 30.		L_ No	4
9, Name and Address of Current Registered Agent									10. Name and Address of New Registere	Agenc		\dashv
	LY, TERRY				Į	81	Name	_				_]
	1 1ST AVE						Street Address (P.O. Box Number is Not Acceptable)					
INAP	PLES FL 33	1999										┥
							City			85 Zir	Carlo	4
							 					
11. Pursuant t	to the provisi	ons of Sections 607.05	02 and 607.1	508, Florida Statul	tes, the ab	ove	-named	corpo	ration submits this statement for the purpose n's board of directors. I hereby accept the a	of changing	its registered	7
agent, I ar	m familiar wit	th, and accept the oblig	gations of, Se	ection 607.0505, FI	orida Statu	ıtes.	-	50, 41.0	in a board of all doctors. Thereby doctops the ap	pon ibrioric a	- : ···	- }
SIGNATURE			1.11. 7								·	
12,	Signature, types	or printed name of registered as OFFICERS AN			13.	Agen	it signature	required	when reinstating) ADDITIONS/CHANGES TO OFFICERS AT	ID DIBECTO	BS IN 12	-16
TITLE	P			——————————————————————————————————————			1.1 TITLE			Change		10/01
NAME	KELLY, T	TERRY L		1.2 N		NAME		ĺ				
STREET ADDRESS	4961 1S	T AVE N.W.		1.3 \$			STREET ADDRESS				2016	F034
CITY-ST-ZIP	_NAPLES	FL		1.4 CI			CITY-ST-ZIP			29-	34117	_ &
TITLE	VΡ			☐ DELETE	2.1 111	LE		EV	(b)	Change	Addition]0
NAME	-	. Herbert H.			2.2 NAME		ł					
STREET ADDRESS		vergreen s.e.		2.3 \$			3 STREET ADDRESS					J
CITY - ST - ZIP							4 CITY - ST- ZIP					4
TITLE	VP.	ICCCCV.				1 -		Sn	v t	Change	Addition	}
NAME		, JEFFERY L.		3.2 N								-
STREET ADDRESS	28042 E BROOKE DR. BONITA SPRINGS FL						ADDRESS	7 %			1135	
CITY-ST-ZIP TITLE	ST	orningo FL		3.4. (DELETE 4.1 T			1 - ZIP	S Che			L Siddition	-
NAME		CYNTHIA L.			4, 1 1311 4, 2 NA					— ∩ or earlige	E MUNICIPII	Į
STREET ADDRESS		H ST S.W.			- 1		nubese				1 -	1
CHY-ST-ZIP	NAPLES						TREET ADDRESS			200 3	34117	
TITLE	1000	<u> </u>		DELETE 5.1 TIT			- 211	☐ Change			Addition	7
NAME					5.2 NA		ļ			•		ļ
STREET ADDRESS					- 1		NODRESS					ĺ
CITY - ST - ZIP					5.4 CIT							
TITLE				DELETE	6.1 TITI					Change	Addition	7
NAME					6.2 NA	ME						1
STREET ADDRESS					6.3 STF	EET A	ODRESS					-
City-St-ZiP 6.4 Ci												_
14. I hereby o	ertify that the	information supplied v	with this filing	does not qualify f	or the exer	npti	on state	d in Se	ection 119.07(3)(i), Florida Statutes. I further	certify that th	e information	

indicated on this annual report or supp officer or director of the corporation or Block 12 or Block 13 if changed, or on to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE: