

CORPORATION  
ANNUAL REPORT

1999

Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 655590

1. Corporation Name

EWING CONSTRUCTION COMPANY, INC.

Principal Place of Business

4344 ENTERPRISE AVE  
NAPLES FL 33942  
US

Mailing Address

PO BOX 7669  
NAPLES FL 33941  
US

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

02/11/1980

4. FEI Number

59-1975227

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution\$5.00 May Be  
Added to Fees8. This corporation owes the current year  
Intangible Personal Property.

Yes No

2. Principal Place of Business

21

Suite, Apt. #, etc.

City &amp; State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

City &amp; State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

EWING, ANDREW J  
2500 COUNTY BARN ROAD  
PO BOX 1241  
NAPLES FL 33939

10. Name and Address of New Registered Agent

81 Name

Joseph D. Stewart, P.A.

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

2671 Airport Road South

83

#302

84 City

Naples

FL

85 Zip Code

34112

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P DELETE

NAME EWING, ANDREW J  
STREET ADDRESS 2500 COUNTY BARN ROAD  
CITY-ST-ZIP NAPLES FL

TITLE ST DELETE

NAME EWING, LINDA FAYE  
STREET ADDRESS 2500 COUNTY BARN ROAD  
CITY-ST-ZIP NAPLES FL

TITLE DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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: Andrew J. Ewing, Pres 7-8-99

941-643-0992

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/99)