Applied For Not Applicable

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

□No

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # 656488

1. Corporation Name

City & State

23

24

DICK MAGLICH CONSTRUCT	ION, INC.			
Principal Place of Business	Mailing Address			
5225 RIVERWOOD AVENUE SARASOTA FL 34231	5225 RIVERWOOD AVENUE SARASOTA FL 34231			
Principal Place of Business	2a. Mailing Address			
Suite, Apt. #, etc.	26 Suite, Apt. #, etc.			

27

28

City & State

Zip

25 29 9. Name and Address of Current Registered Agent

Country

MAGLICH, RICHARD C.

**5225 RIVERWOOD AVENUE** 

## **FILED** Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90079 009 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

6. Election Campaign Financing Trust Fund Contribution

Personal Property Tax.

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

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

02/20/1980 4. FEI Number

59-2005059

SARASUIA FL 96001 3 4631			83					
			84	City		FL 85		
office or r	to the provisions of Sections 607.0502 a egistered agent, or both, in the State of F m familiar with, and accept the obligation	lorida. Such change was au	thorized by '	the corporation	poration submits this statement for the on's board of directors. I hereby acce	e purpose of chang pt the appointmen	ging its r it as regi	egistered istered
SIGNATURE	Signature, typed or printed name of registered agent are	Little if peoplicable (NOTE:	Registered Agen	signature require	d when reinstating)	DATE		\
12.	OFFICERS AND D		13.					RS IN 12
TITLE	P	☐ DELETE	1.1 TITLE		· · · · · · · · · · · · · · · · · · ·		hange	☐ Addition
NAME	MAGLICH, RICHARD C		1.2 NAME					
STREET ADDRESS	5225 RIVERWOOD AVE		1.3 STREET	ADDRESS				,
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-\$7	-ZIP		_		
TITLE	S	☐ DELETE	2.1 TITLE				hange	☐ Addition
NAME	MAGLICH, ROSEANN		2.2 NAME					
STREET ADDRESS	5225 RIVERWOOD AVE		2.3 STREET	ADDRESS				
CITY-ST-ZIP	SARASOTA FL		.2.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	3.1 TITLE		· ·		hange	☐ Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET	ADDRESS				ļ
CITY-\$T-ZIP			3.4. CITY-5	r-ZIP				
TITLE		☐ DELETE	4.1 TITLE				hange	Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST	-ZIP				
TITLE		☐ DELETE	5.1 TITLE			, D	hange	Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET					
CITY-ST-ZIP		·	5.4 CITY-S1	-ZIP				
TITLE		☐ DELETE	6.1 TITLE	}		110	hange	☐ Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET					
CITY-ST-ZIP			6.4 CITY-S1		1 140 07(0)() Flydd 0: 1	1 5:	ot the !-	formation
14. I hereby o	ertify that the information supplied with the	his filing does not qualify for	tne exempti	on stated in S	Section 119.07(3)(i), Florida Statutes.	i further certify th	at the In	iomation

Country

81 Name

30

indicated on this annual report or supplied with an address, in the exemption stated in Section 1.13.07(3)(f), Florida Statutes. In the Certify that it am an officer or director of the corporation of 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, with all other like empowered.

SIGNATURE: