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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 658474

(2)

PROUD PELICAN CONSTRUCTION, INC.

Mailing Address

FILED Mar 18 1998 8:00am Secretary of State



BROOKSVILLE FL 34613			BROOKSVILLE FL 34613				DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualified 03/10/1980				
2. Principal Place of Busines	SS	20.	Mailing Address				4. FEI Number	Applied For			
1		26					59-1984422	Not Applicable			
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required				
City & State			City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip 2!	Gountry	29	Ζφ	30 C	ountry		8. This corporation owes or has pald the cur Personal Property Tax due June 30.	rrent year Intangible ☐ Yes ☐ No			
9, Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent				
JOHNSTON, JO					81	Name	_				
29 SOUTH BROOKSVILLE AVENUE BROOKSVILLE FL 33512				82	Street Address (P.O. Box Number is Not Acceptable)						
					83						
			4	ſ	84	City	FL	85 Zip Code			
11. Pursuant to the provision	is of Sections 607.0502 a	and 6	07.1508, Florida Statute	es, the	above	-named corpo	oration submits this statement for the purpose of	changing its registered			

agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Signature, typod or profed name of registered agent and talk it applicable (NOTE Registered Agent signature required when reinstating) DATE											
12.	Signature, typod or printed name of registeric agent and title if applications OF FICERS AND DIRECTORS		Registered Agent signature	ADDITIONS/CHANGES TO OFFICE	DATE BS AND DIRECTOR	S IN 12					
TOLE	DST DST	DELETE	1.1 TITLE	ADDITIONS/OF ANGLE TO OF FIGE	Change	Addition					
NAME	PEARSON, DOROTHY G		1.2 NAME			trial					
	3258 MINNOW CREEK DR										
STREET ADDRESS			1.3 STREET ADDRESS								
CITY-ST-ZIP	SPRING HILL FL 34607	DELETE	1.4 CITY-ST-ZIP		☐ Change	Addition					
TITLE	PD	☐ DELETE	2.1 TITLE		□ Change	L.J Addition					
NAME	PEARSON, SAMUEL RICHARD		2.2 NAME								
STREET ADDRESS	P.O. BOX 844 N/A		23 STREET ADDRESS								
CITY-ST-ZIP	BROOKSVILLE FL 34601		2 4 CITY - ST - ZIP								
TITLE	D	DELETE	31 TITLE		Change	Addition					
NAME	PEARSON, STEVEN W		3.2 NAME								
STREET ADDRESS	2178 MARINER BLVD		3.3 STREET ADDRESS								
CITY-ST-ZIP	SPRING HILL FL		3.4. CITY-ST-ZIP								
TITLE		DELETE	4.1 TITLE		Change	Addition					
NAME			4.2 NAME								
STREET ADDRESS			4.3 STREET ADDRESS								
CITY-ST-ZIP			4.4 CITY-ST-ZIP								
TITLE		DELETE	5.1 TITLE		☐ Change	Addition					
NAME			5.2 NAME								
STREET ADDRESS			5.3 STREET ADDRESS								
CITY-ST-ZIP			5.4 CITY-ST-ZIP								
TITLE		DELETE	6.1 TETLE		Change	☐ Addition					
NAME			6.2 NAME								
STREET ADORESS			6.3 STREET ADDRESS								
. (T								

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 suppliemental 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 trusted 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:

March 12, 1998

(352) 796-9604