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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 688783

1. Corporation Name

JAX UTILITIES CONSTRUCTION COMPANY, INC.

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Principal Place of Business Mailing Address							1 199119 \$1101 10101 19111 19011	744 1747 47411 474	(, 2, 2, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,		
HASKELL BUILDING 111 RIVERSIDE AVENUE JACKSONVILLE FL 32202-4950		Haskell Building 111 Riverside avenue Jacksonville Fl 32202-4950			DO NOT WRITE IN THIS SPACE						
						1	Date Incorporated or Qualifed				
							09/09/1980	• • • • • • • • • • • • • • • • • • • •		A	
	lace of Business	2a. Mailing Address					FEI Number		\vdash		ed For
21		26				+	59-2036000	<u></u>	\$8.7		pplicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5.	Certifcate of Status Desired	<u> </u>		Requ	
City & Stat	e	City & State				6.	Election Campaign Financing			00 ма	•
23		28					Trust Fund Contribution		Adde	ed to F	ees
Zip	Country	Zip	Count	try		8.	This corporation owes the curr	rent year Inta		_	151.
24	25		30				Personal Property Tax.		☐ Yes		No
	9. Name and Address of Currer	nt Registered Agent			1	<u> 10.</u>	Name and Address of New F	Registered A	tgent		
	DEDODIEE O EDWADD			81) N	Name						
VANDERGRIFF, C. EDWARD					Street Addre	ess (P	O. Box Number is Not Accept	able)			
1950 LARGO PLACE											
JACI	KSONVILLE FL 32207		8	33							
			8	84 (City				85 Z	Zip Coo	de
				_				<u>FL</u>			to be and
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was au	thorized t	by the	e corporation	n's bo	oard of directors. I hereby acce	pt the appoir	tment as	s regis	tered
SIGNATURE								DATE			
	Signature, typed or printed name of registered age	Int and title if applicable. (NOTE INTERNATIONAL NOTE INTERNATIONAL NO	·	gent sig	gnature required		einstating) ADDITIONS/CHANGES TO OF		D DIREC	TOR!	S IN 12
12.				13.			ADDITIONS/OTANGED TO GE	TIOLITO AIT	[] Chan		Addition
NAME	PD DESTON H		1.2 NAME							•	
	HASKELL, PRESTON H		1		nncéé						
STREET ADDRESS	111 RIVERSIDE AVE			1.3 STREET ADDRESS 1.4 CITY-ST-ZIP							
CITY-ST-ZIP	JACKSONVILLE FL	☐ DELETE	2.1 TITLE		P				[] Chan	ge	Addition
TITLE	SD COMMENCE OF TOWARD	C) VELETE	2.1 IIILE 2.2 NAME							•	_
NAME	VANDERGRIFF, C. EDWARD			2.3 STREET ADDRESS							
STREET ADDRESS					[
CITY-ST-ZIP	JACKSONVILLE FL	⊠ DELETE	2.4 CIT		IP				Chan	nge	Addition
TITLE	V CONTROL TO WARD IN ID	A DELETE	3.1 TITLE							•	
NAME	MULLINIX, EDWARD W JR.		3.2 NAME 3.3 STREET		npess						
STREET ADDRESS	1		3.4 CITY-ST								
CITY-ST-ZIP	JACKSONVILLE FL	☐ DELETE	4.1 TITLE		II"		•		Chan		Addition
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NAME			ı ı		ODECC						
STREET ADDRESS			4.3 STREET								
CITY-ST-ZIP		☐ DELETE	5.1 TITLE		<u> </u>				[] Chan	iqe	Addition
TITLE		OCCLE	5.1 111L							•	_
NAME			5.3 STR		DRESS						
STREET ADDRESS			5.4 CITY								
CITY-ST-ZIP		□ DELETE	6.1 TITL						[] Chan	nge	Addition
L HILE											

CITY-ST-ZIP 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 polemental 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 bit the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in on an attachment with an address, with all other like empowered. 14. I hereby certify that the information indicated on this annual report or su officer or director of the corporation Block 12 or Block 13 if changed, or

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE

TITLE

NAME

STREET ADDRESS

02/19/99