

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Jul 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 694318
1. Corporation Name

(7)

D. GARRETT CONSTRUCTION, INC.



Principal Place of Business

4933 N. TAMiami TRAIL
SUITE 300
NAPLES FL 34103
US

Mailing Address

4933 N TAMiami TR
SUITE 300
NAPLES FL 33940
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/13/1981

4. FEI Number

59-2111672

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

GARLICK, THOMAS B.
8889 PELICAN BAY BLVD
STE 300
NAPLES FL 34108

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 PTD
NAME GARRETT, DONALD
STREET ADDRESS 821 BUTTONBUSH LANE
CITY-ST-ZIP NAPLES FL

☐ DELETE

TITLE VS
NAME GARRETT, MARGARET
STREET ADDRESS 821 BUTTONBUSH LANE
CITY-ST-ZIP NAPLES FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CHAIRMAN / CHIEF EXECUTIVE ☒ Change ☒ Addition
1.2 NAME
1.3 STREET ADDRESS OFFICER / DIRECTOR

1.4 CITY-ST-ZIP

2.1 TITLE DIRECTOR / SECRETARY - ☒ Change ☒ Addition
2.2 NAME TREASURER
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE PRESIDENT / DIRECTOR ☐ Change ☒ Addition
3.2 NAME BRUCE GILBERT
3.3 STREET ADDRESS 2232 OUTRIGGER LANE
3.4 CITY-ST-ZIP NAPLES, FLORIDA 34104

4.1 TITLE VICE - PRESIDENT ☐ Change ☒ Addition
4.2 NAME JON GRANHOLM
4.3 STREET ADDRESS 2248 OUTRIGGER LANE
4.4 CITY-ST-ZIP NAPLES, FLORIDA 34104

5.1 TITLE VICE - PRESIDENT ☐ Change ☒ Addition
5.2 NAME BRAD KOVACH
5.3 STREET ADDRESS 4250 HAWAII BLVD.
5.4 CITY-ST-ZIP NAPLES, FLORIDA 34112

6.1 TITLE
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:

DONALD E. GARRETT

7-6-98 (941) 643-2900

CR2E034 (5/98)