

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

FILED

Feb 02, 1999 8:00am
Secretary of State

02-02-1999 90001 022 *****150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 823141

1. Corporation Name

W.R. MITCHELL CONTRACTOR, INC.

Principal Place of Business

704 S SHELTON BEACH RD EXT
P.O. BOX 13130
EIGHT MILE AL 36613-3928

Mailing Address

704 S SHELTON BEACH RD EXT
P.O. BOX 13130
EIGHT MILE AL 36613-3928

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/31/1969

4. FEI Number

63-0572549

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 the current year Intangible
Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C.T. CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 SD ☐ DELETE

NAME WILLIAMS, SHARON KAY
STREET ADDRESS 704 S SHELTON BCH RD
CITY-ST-ZIP EIGHT MILE AL

TITLE PTD ☐ DELETE

NAME MITCHELL, RALPH WAYNE
STREET ADDRESS 704 S SHELTON BCH RD
CITY-ST-ZIP EIGHT MILE AL

TITLE ☐ DELETE

NAME C.T. CORPORATION SYSTEM
STREET ADDRESS 1200 SOUTH PINE ISLAND ROAD
CITY-ST-ZIP PLANTATION FL 33324

TITLE ☐ DELETE

NAME W.R. MITCHELL CONTRACTOR, INC.
STREET ADDRESS 704 S SHELTON BEACH RD
CITY-ST-ZIP EIGHT MILE AL

TITLE ☐ DELETE

NAME SD
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 with all other like empowered.

SIGNATURE: *[Signature]* REQUIRED

Date

Daytime Phone #