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May 01 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 # F16058 (2)
1. Corporation Name
FLORIDA GULF CONSTRUCTION COMPANY



Principal Place of Business
4863 GUM ROAD
TALLAHASSEE FL 32304

Mailing Address
454 SECOND ST.
P.O. BOX 6275
ALBANY NY 12206
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/23/1981

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For
Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

14-1622327

6. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

23 Zip

Country

28 Zip

Country

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

24

25

29

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PUCILLO, MICHAEL J
321 ROYAL POINCIANA PLAZA SOUTH
PALM BEACH FL 33480

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME CRANDELL, DANIEL R.
STREET ADDRESS ROUTE 2, BARTON HILL ROAD
CITY-ST-ZIP SCHOHARIE NY

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE PID
NAME ZERONDA, FRANK J
STREET ADDRESS 15 LYONS AVE
CITY-ST-ZIP DELMAR NY

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE S
NAME CRANDELL, DANIEL R
STREET ADDRESS RT 2 BARTON HILL RD
CITY-ST-ZIP SCHOHARIE NY

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE V
NAME CRANDELL, DANIEL R
STREET ADDRESS RT 2 BARTON HILL RD
CITY-ST-ZIP SCHOHARIE NY

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE V
NAME HATLEE, THOMAS E.
STREET ADDRESS RT. 14, 348-24 GUM RD
CITY-ST-ZIP TALLAHASSEE FL

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE D
NAME HATLEE, THOMAS E
STREET ADDRESS RT. 14-348-24 GUM ROAD
CITY-ST-ZIP TALLAHASSEE FL

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

Frank J. Zeronda

CR2E034 (10/97)