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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F19067

(0)

MCKEE CONSTRUCTION CO.

2200 W. AIRPORT RI VI)	2290 W. AIRPORT BLVD.
Principal Place of Business	Mailing Address

FILED Jan 27 1997 8:00am Secretary of State



, Signal Clause					- 1				
2290 W. AIRPO SANFORD FL 3		2290 W. AIRPORT BLVD. SANFORD FL 32771-7211							
					ŀ	3. Date Incorporated or Qualified	3a. Da	ate of Last F	Report
					1	02/02/1981	וכח ו	15/1996	·
2. Principal Pt	lace of Business	2a. Mailing Address				4. FEI Number	VEI		pplied For
21		26				59-2077753			lot Applicable
Suite Apt.	#. etc	Suite, Apt. #, etc.						4	Additional
27					5. Certificate of Status Desired		T - · · · -	lequired	
City & State	C	City & State				6. Election Campaign Financing		\$5.00) May Be
23		28				Trust Fund Contribution			l to Fees
Zip	Country	Zip	Count	гу	ĺ	8. This corporation has liability for	_ ~ _	_	s. 1 9 9.032,
24	25		30				Yes L		
	9. Name and Address of Curren	t Registered Agent		<u> </u>	,	10. Name and Address of New Re	gistered	Agent	
MCK	kee, robert e.		8	1 Name	M L	ERBULIS, Pober	+ F		
2290) w airport bl.vd.		6	2 Street,	Addres	s (P.O. Box Number is Not Acceptal	ole)	4	······
SAN	FORD FL 32771			4	<u> </u>	Kimberly Ct.			
			8	3		,			
			8	4 City	\sim	^		85 Zip	Code
i				130	mto	ord	<u>FL</u>	32	221
11. Pursuant	to the provisions of Bestions 607 0502 registered agent, or both, in the State im familiar with and accept the obliga	2 and 607.1508, Florida Statute	es, the abo	ve-named	corpor	ation submits this statement for the party board of directors. I bereby accept	ourpose of	changing	its registered
agent. La	m familiar with and accept the obliga	gions of, Section 607.0505, Flo	orida Statut	es.	polatio	f	prine app	1	a rogistered
SIGNATURE	Tout I lear	(V 1 ' - ()		" "		President when reinstating)	118	197	
				gent signature	B required		DATE	7	
12.	OFFICERS AND		13.		100	ADDITIONS/CHANGES TO OFFICE	JERS AND		
TITLE	PD	DELETE	1.1 TITLE		PD	Harry is a 1 +		Change	Addition
NAME	MCKEE, ROBERT E		1.2 NAM		VON	HERBULIS, Robert	Ρ.		
STREET ADDRESS	2290 W AIRPORT BLVD			ET ADDRESS	· ~ `	Kimberly ct.			
CITY-ST-ZIP	SANFORD FL	DELETE		- ST- ZIP	<u>≥</u> w	ntord , FL 3277	<u>'</u>	T Oberes	Addition
1/ILE	VP	☐ DELETE	2.1 TITLE		5	11		Change	Addition
NAME	VONHERBULIS, ROBERT		2.2 NAM			HERBULIS, DEBOI	24		
STREET ADDRESS	401 KIMBERLY CT			et address	401	Kimberly ct.	_		
CITY - S1 - ZIP	SANFORD FL	DELETE		r-ST-ZIP	50	ntord, F1 3272,	<u> </u>	Channe	Addition
TITLE	CS	Proceed	3.1 TITU					Change	AUGIIION
NAM É	STENSTROM, ROBIN M.	•	3.2 NAM		1				
STREET ADDRESS	1511 S. OREGON AVENUE			et adoress					
CITY - S' - 7IP	SANFORD FL	DC) FXC		r-ST-ZIP	 				A delican
TITLE		DELETE	4.1 TiTL		1			Change	Addition
NAME			4. 2 NAN						
STREET ADDRESS				ET ADDRESS					
CITY - ST - ZIP		DELETE		-ST-ZIP	 			Change	Addition
TITLE	}	DELETE	51 TITU		1			L Unarige	LLJ AGBIEON
NAME			52 NAM						
STREET ADDRESS	,			ET ADDRESS		·			
CITY - ST - ZIP		T priese		- ST - ZIP	—				4 444-
YITLE	1	DELETE	6.1 TITL					Change	Addition
NAME			6.2 NAM						
STREET ADDRESS			6.3 STR	ET ADDRESS					
C/TY - ST - Z/P			6.4 CITY	- \$1 - ZIP	<u> </u>				
المسمط ملما الأجلك	ta i i angle di li ste inggalang daga i mga manggalang mga mga mga mga mga mga mga mga mga mg	كالمناس ومصموم مساسي مناكك مكواه والاكانان				Continue (10 07/2)/// Elevido Statute	بمطاحب الأساسي	صحاف کاند سے م	

I do 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 chapted, or an attachment with an address.

SIGNATURE:

TATURE AND TYPED OR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

18/97

407-323-1150