

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Apr 12, 1999 8:00 am
Secretary of State

04-12-1999 90039 016 ***150.00

DOCUMENT # F22602

1. Corporation Name
TERWILLIGER MASONRY & CONCRETE, INC.

Principal Place of Business
10975 HAVEN LN
BONITA SPRGS FL 34135
US

Mailing Address
10975 HAVEN LANE
BONITA SPRGS FL 33923
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/10/1981

4. FEI Number

59-2076543

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

Trust Fund Contribution

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

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2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

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9. Name and Address of Current Registered Agent

BATCHELOR, DAN E; PA
4171 W BONITA BCH RD
BONITA SPRGS, FL
34134

10. Name and Address of New Registered Agent

81 Name GARY T. TERWILLIGER
82 Street Address (P.O. Box Number is Not Acceptable)
10975 HAVEN LN
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84 City BONITA SPRINGS FL 85 Zip Code 34135

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]* GARY T. TERWILLIGER

4-6-99

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
ST	TERWILLIGER, GARY L.	10851 RED DRAGON LN	BONITA SPGS FL	<input type="checkbox"/>
DPC	TERWILLIGER, GARY T	10975 HAVEN LANE	BONITA SPRINGS, FL. 00000	<input type="checkbox"/>
				<input type="checkbox"/>
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				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
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				<input type="checkbox"/>	<input type="checkbox"/>

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] GARY T. TERWILLIGER 4-6-99 941-992-2789

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0461577