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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F39791

(1)

BRALEW CONSTRUCTION, INC. Principal Place of Business Mailing Address 20960 SANDY LN 20960 SANDY LN P O BOX 1270 P O BOX 1270 ESTERO FL 33928-1270 ESTERO FL 33928 3. Date Incorporated or Qualified 3a, Date of Last Report 06/08/1981 05/01/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-2116069 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 风 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country $Z_{\rm IP}$ Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name LEWIS. JEFF 20960 SANDY LANE Street Address (P.O. Box Number is Not Acceptable) **B2** ESTERO FL 33928 83 84 City 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: hipsed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Change Addition 1.1 TITLE TITLE LEWIS, JEFF NAME 1.2 NAME 20960 SANDY LANE 1.3 STREET ADDRESS STREET ADDRESS **ESTERO FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP Addition DELETE 2.1 TITLE THILE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP C:TY-S1-ZIP DELETE ☐ Change Addition TIFLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4 CITY-ST-ZIP Addition DELETE Change 4.1 TITLE TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIF 4.4 CITY-ST-ZIP Addition DELETE Change 5.1 YITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST ZIP 5.4 CITY-ST-ZIP

6.4 CITY - ST - ZIP CITY - ST - ZIP 14. I do neceby 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.

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

THELE NAME

STREET ADDRESS

DELETE

941-267-9001

Change

Addition

(96/6)

FILED

Feb 19 1997 8:00am

Secretary of State