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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F53590

(8)

KRASEMANN CONSTRUCTION COMPANY, INC.

**FILED** Apr 07 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						r nodinate isas triod altai ditist bibit teori disait bibit diditi diditi	OTRICEIDIN 1993	
24332 DORSEY SMITH ROAD BROOKSVILLE FL 34601			24332 DORSEY SMITH ROAD BROOKSVILLE FL 34601			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
4.5.						11/13/1981		
	lace of Business	<u> </u>	2a. Mailing Address			4. FEI Number	уфриссто	
Suite, Apt.	# atc	26 Suito Ant	Suite, Apt. #, etc.			59-2146527	Not Applicable	
22		27	27			L b. Ceruicare of Status Desired L 1	Fee Required	
City & State	0		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip Country			Z(p Country					
24	25 29 30		Jun.,	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.				
	9, Name and Address of Current Registered Agent			T		10. Name and Address of New Registered Agent		
KR	ASEMANN, ALAN K.			81	Name			
3389 RACKLEY ROAD				82	Street A	treet Address (P.O. Box Number is Not Acceptable)		
	OOKSVILLE FL 34609				0,000,7	The state of the s		
				63				
				84	,	FL	ip 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. 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 agreet and title it applicable (NOTE R				13.			ODC IN 40	
TITLE	P			TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECT		
NAME	KRASEMANN, ALAN I			NAME		CI CINING	jo	
STREET ADDRESS				1.3 STREET ADDRESS				
CITY-ST-ZIP	BROOKSVILLE FL			1.4 CITY-ST-ZIP				
TITLE	ST DELETE			2.1 TITLE		Chang	e Addition	
NAME	KRASEMANN, LOIS		2.2	NAME				
STREET ADDRESS	3389 RACKLEY ROAL	)	2.3	STREET	ADDRESS		+	
CITY-ST-ZIP	BROOKSVILLE FL		2. 4	CITY-S	ST-ZIP			
TITLE			DELETE 3.1	TITLE		☐ Chang	e Addition	
NAME			3.2	NAME				
STREET ADDRESS			3.3	STREET	ADDRESS		İ	
CITY-ST-ZIP				CITY- S	ST-ZIP		1	
TITLE			DELETE 4.1	TITLE		Chang	e Addition	
NAME			4.2	NAME			ĺ	
STREET ADDRESS					ADDRESS		}	
CITY-ST-ZIP	" P'= .'			CITY-S	7 - ZIP			
TITLE				TITLE		Chang	e 🗀 Addition	
NAME				NAME				
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP				CITY-S	T-ZIP			
TOTLE		ليا		TITLE		J Chang	e L Addition	
NAME				NAME	ŀ			
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			6.4	CITY-S	T-ZIP			

Thereby 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.

GNATURE:

42.98

352-796-476