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Mar 19 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F69161 (0)

1. Corporation Name
WILLIAM F. OLSEN JR., CONSTRUCTION INC.

Principal Place of Business

% MARIE P OLSEN
594 NORTH QUINCY ROAD
VENICE FL 34293

Mailing Address

% MARIE P OLSEN
594 NORTH QUINCY ROAD
VENICE FL 34293-3022



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

3. Date Incorporated or Qualified

03/02/1982

3a. Date of Last Report

03/12/1996

4. FEI Number

59-2219826

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

OLSEN, MARIE P
594 NORTH QUINCY ROAD
VENICE FL 33595

10. Name and Address of New Registered Agent

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

TITLE ☐ DELETE

NAME
PSD
OLSEN, WILLIAM F., JR
STREET ADDRESS
594 NORTH QUINCY ROAD
CITY- ST- ZIP
VENICE FL

TITLE ☐ DELETE

NAME
VDT
OLSEN, MARIE P.
STREET ADDRESS
594 NORTH QUINCY ROAD
CITY- ST- ZIP
VENICE FL

TITLE ☒ DELETE

NAME
VP
UNGER, JEFFREY
STREET ADDRESS
474 CRANE RD
CITY- ST- ZIP
VENICE FL

TITLE ☐ DELETE

NAME
VP
MUSE, STANBEY K.
STREET ADDRESS
617 SHORE ROAD
CITY- ST- ZIP
NOKOMIS FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP
TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

Billy Bedweh
1315 Poplar Ave
Venice, FL 34299

14. 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 included 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:

William F. Olsen Jr.

William F. Olsen, Jr.

2-21-97

941-493-8903

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)