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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 DOCUMENT # F74851

1. Corporation Name FLINN CONSTRUCTION, INC.

	<u>-</u>
Principal Place of Business	Mailing Address
8720 SHORE LN VERO BEACH FL 32967	8720 SHORE LN VERO BEACH FL 32967

FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90104 005 ***150.00



VERO BEACH F		67 VERO BEACH FL 32967					
US	US US		DO NOT WRITE IN THIS SPACE				
					3. Date incorporated or Qualifed 04/02/1982		
2. Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			59-2214713	1_1	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional Required
City & State	е	City & State			Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country	Zip	Coun	try	This corporation owes the current		/
24	25	29 30			Personal Property Tax.		
-	9. Name and Address of Current		-		10. Name and Address of New Regi	stered Agent	
			8	Name			
	N, JAMES E.		ļ.,	32 Street	Address (P.O. Box Number is Not Acceptable)		
	SHORE LANE		'	Sucet /	nuuless (F.O. DOX Humber is Not Acceptable)		
VER	D BEACH FL 32967		ļī	33			
	•		Į.	34 City		85 Zip	Code
						FL	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the abo	ove-named	corporation submits this statement for the purp	oose of changing i	ts registered
office or r	egistered agent, or both, in the State on m familiar with, and accept the obligat	ot Florida. Such change was auti	norizea i	ov the corbo	oration's board of directors. I hereby accept the	з арронинен : as i	registered
SIGNATURE							}
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: R	egistered A	gent signature re	***************************************	DATE	
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFICE		
TITLE	DP	☐ DELETÉ	1.1 TITL	E		Change	e 🔲 Addition
NAME	FLINN, JAMES E.		1.2 NAW	E			ļ
STREET ADDRESS	8720 SHORE LANE		1.3 STR	EET ADDRESS			1
CITY-ST-ZIP	VERO BEACH, FL 00000		-	-ST-ZIP			e
TITLE		☐ DELETE	2.1 TITL			☐ Change	- Madigon
NAME			2.2 NAV	E			}
STREET ADDRESS			2.3 STR	EET ADDRESS			}
CITY-ST-ZIP			-	Y-ST-ZIP		Change	e
TITLE		☐ DELETE	3.1 TITL			☐ Change	
NAME			3.2 NAM				
STREET ADDRESS			3.3 STR	EET ADDRESS			
CITY-ST-ZIP			_	(-ST-ZIP			a District
TITLE		☐ DELETE	4,1 TITL			☐ Change	e 🔲 Addition
NAME			4. 2 NA	Æ			
STREET ADDRESS			4.3 STR	EET ADDRESS			
CITY-ST-ZIP				'-ST-ZIP			- Daddir'-
TITLE	1	☐ DELETE	5.1 TITL			☐ Change	e
NAME			5.2 NAM	•			
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP			4	-ST-ZIP			- Dadout
TITLE	**	☐ DELETE	6.1 TTL			☐ Change	e 🗌 Addition
NAME			6.2 NAM				
STREET ADDRESS	` *			EET ADDRESS			
CITY-ST-ZIP	, · · · · ·	÷	6.4 CITY	-ST-ZIP			

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 charged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

4.30.0

561.589-0269