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

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAM

CITY - ST - ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 07 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F77381

(4)

DAUNCEY CONSTRUCTION, INC.

Principal Place of Business Mailing Address 1198 S.W. 4TH AVE. 1198 S.W. 4TH AVE. BOCA RATON FL 33432 BOCA RATON FL 334			-7125							
						3. Date Incorporated or Qualified				
2. Principal Place of Business 2a. Mailing Addres 21 26						4. FEI Number 59-2179641	Applied For Not Applicable			
Suite, Apt. #, etc Suite, Apt. #, etc. 27						5. Certificate of Status Desired	□ \$	8.75	Additional legulred	
City & State City & S 23 28			State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Z ₁ p	Country 25	Zip 29	Zip Country 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
	Name and Address of Curr	ent Registered Agent	*******			10. Name and Address of New Reg	Istered Age	nt		
DAU	JNCEY, JAMES R			81	Name				***************************************	
1198 S.W. 4TH AVE. BOCA RATON FL 33432				82	Street A	Address (P.O. Box Number is Not Acceptable)				
				83				·		
				84	City		FL 8		Code	
office or r	to the provisions of Sections 607.0 registered agent, or both, in the Sta im familiar with, and accept the obl	ite of Florida. Such change wa	as authorize	ad by	the corpo	orporation submits this statement for the paration's board of directors. I hereby accep	rpose of cha t the appointr	nging i	its registered registered	
SIGNATURE	Signature typed or printed name of registered i									
12.		IND DIRECTORS	13.		mi signature n	equired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	ECTO	DC IN 10	
TITLE	DP	DELETE		IITLE		ADDITIONS/CHANGES TO OFFIC		Change	Addition	
NAME	DAUNCEY, JAMES R			VAME				O Mariga		
STREET ADDRESS	1198 S.W. 4TH AVE.				ADDRESS					
CITY-ST-ZIP	BOCA RATON FL				1					
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				NAME						
STREET ADDRESS					ADDRESS					
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TITLE		☐ DELETE	6.1 T	ITLE				Change	Addition	
MANAT					1					

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with his 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 suppliernental 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 couporation of 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 only a attachment with an address