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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9500004762

1. Corporation Name

SALTSMAN CONSTRUCTION, INC.

Principal Place of Business Mailing Address 65-12TH STREET SOUTH //9/ Lat AUESO P.O. BOX 310 NAPLES FL 34102-6265 NAPLES FL 34106-0310 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 10/02/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 65-0606913 Not Applicat 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired \Box Fee Required 27 22 City & State City & State Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Country Zip Zio This corporation owes the current year Intangible □No ☐ Yes Personal Property Tax. 25 29 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SALTSMAN, JOHN W. JR Street Address (P.O. Box Number is Not Acceptable) 82 -65 12TH ST 6 - //9/ lot ave So. NAPLES FL 34102-6265 83 Zip Code 84 City 85 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13 12. ☐ DELETE 1.1 TITLE ☐ Change TITLE

SALTSMAN JR, JOHN W 1.2 NAME 1191 lat AUE 50 NAPLES FL 34102-6265 NAME 65 12TH ST S 1.3 STREET ADDRESS STREET ADDRESS NAPLES FL 85 1.4 CITY-ST-ZIP CITY-ST-ZIF DELETE TITLE 2.1 TITLE SALTSMAN, SUZANNE 2.2 NAME 1191 lot AVE 50 NAPLES, FL 34102-6265 NAME 65 12TH ST-S STREET ADDRESS 2.3 STREET ADDRESS NAPLES FL 65 CITY-ST-ZIP 2.4 CITY-ST-ZIP ☐ DELETE 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY+ST-ZIP Change Addit □ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change DELETE Additi 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 61 TITLE DELETE ☐ Change Additi TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP Caty-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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Daytime Phone #

FILED Jun 25, 1999 8:00 am

Secretary of State

06-25-1999 90012 022 ***550.00