

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F96000001492 (5)

1. Corporation Name

PETERS CONTRACTING, INC.

Principal Place of Business

2960 FAIRVIEW DR
OWENSBORO KY 42302-0099

Mailing Address

2960 FAIRVIEW DR
OWENSBORO KY 42302-0099

FILED
Aug 06 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/22/1996

4. FEI Number

61-1166324

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip 42303

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 42303

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 DP ☐ DELETE

NAME PETERS, BRUCE A
STREET ADDRESS 2960 FAIRVIEW DR
CITY-ST-ZIP OWENSBORO KY 42302-0099 42303

TITLE DV ☐ DELETE

NAME MATTINGLY, DAVID J
STREET ADDRESS 2960 FAIRVIEW DR
CITY-ST-ZIP OWENSBORO KY 42302-0099 42303

TITLE ST ☐ DELETE

NAME DUNAWAY, J.M.
STREET ADDRESS 2960 FAIRVIEW DR
CITY-ST-ZIP OWENSBORO KY 42302-0099 42303

TITLE Vice Pres. ☐ DELETE

NAME Frank Brancato
STREET ADDRESS 2960 Fairview Dr.
CITY-ST-ZIP Owensboro Ky 42303

TITLE Vice Pres. ☐ DELETE

NAME Stephen F. Bosley
STREET ADDRESS 2960 Fairview Dr.
CITY-ST-ZIP Owensboro Ky 42303

TITLE ☐ DELETE

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

300002610203
-08/07/98--01014--026
***150.00

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.

SIGNATURE:

[Signature]

CR2E034 (5/98)



CONTRACTING, INC.

of 2

P.O. BOX 99 • OWENSBORO, KENTUCKY 42302
TELEPHONE: (502) 926-4520 • FAX # (502) 926-4052

July 29, 1998

Florida Department of State
Division of Corporations
Annual Report Division
409 East Gaines Street
Tallahassee, Florida 32314

Subject: 1998 Annual Report

To Whom it May Concern:

I recently received a 2nd notice from your department stating that our Annual Report Packet is past due. I have not received the original notice, and therefore did not forward the packet and payment to you. I was told by a representative of your office to forward this letter and a check in the amount of \$150.00 and this situation would be reviewed.

Please let me know if you need anything additional. I appreciate your help.

Thank you,

Sabrina M. Free
Licensing Coordinator