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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9700005448 (2)

1. Corporatio	C CONTRACTING, INC.	0000	, ( <u>~</u> )				
Principal Plac	e of Business	Mailing Addre	SS				<b>                                    </b>
135 CLERMONT DRIVE 135 CLERMONT DRIVE						ļ	
PO BOX 844 PO BOX 844							
BARDSTOWN KY 40004 BARDSTOWN KY 40004					DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 10/16/1997	
2. Principal Place of Business 2a. Mailing Add			dress			4. FEI Number	Applied For
21		26				61-1042117	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional
22 27						G. Schmodis St. States School	Fee Required
City & Stat	6	City & State				6. Election Campaign Financing	<b>\$5.00</b> May Be
23		28				Trust Fund Contribution	Added to Fees
Zip	· —		Zip Cou			8. This corporation owes or has paid the	
24	25 29 9. Name and Address of Current Regist			30]		Personal Property Tax due June 30.  10. Name and Address of New Register  10. Personal Property Tax due June 30.	Yes No
	<del></del>	ant Nagistarad Again	·	81	Name	to, Hame and Address of New Hegister	ou nyont
	AHERTY, JAMES 57 EAST UNION CIRCLE						
	LTONA FL 32725			82	Street Add	Iress (P.O. Box Number is Not Acceptable)	
UC	LIUNA FL 32729			83			
				84	City	ı	Zip Code
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Flo	rida Statutes	, the above	-named cor		
office or i	registered agent, or both, in the Sta	te of Florida. Such ch	ange was au 17.0505. Flori	ithorized by	the corpora	poration submits this statement for the purposition's board of directors. I hereby accept the	appointment as registered
	an ignitial more and decopy the ob-	gations of, coolien of		in Diameter	•		
SIGNATURE	Signature, typed or printed name of registered a	gent and little if applicable	(NOTE:	Registered Age	nt signature requ	ired when reinstating) DA	TE
12.		ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE	·-		1.1 TITLE	-		Change Addition	
NAME	WILSON, EARL		1.2 NAME	j	·		
STREET ADDRESS	DORESS 1125 BORDERS LANE			1.3 STREET ADDRESS			
CITY-ST-ZIP	BARDSTOWN KY 40004			1.4 CITY-S	T-ZIP		- 17 80 PM 2788
TITLE			2.1 TITLE			Change Addition	
NAME	MCINTYRE, TOM			2.2 NAME			
STREET ADDRESS	135 CLERMONT DRIVE			2.3 STREET	ADDRESS		
CITY-ST-ZIP	BARDSTOWN KY 40004	···			T-ZIP		
TITLE	1		3.1 TITLE			Change Addition	
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET	į į		
CITY-ST-ZIP			DCI ETC	3.4. CITY - S	IT-ZIP		☐ Change ☐ Addition
TITLE		لسا	DELE <b>TE</b>	4.1 TITLE			C Overigo C Add(10()
NAME				4. 2 NAME			
STREET ADDRESS				4.3 STREET	L		
CITY-ST-ZIP			DELETE	4.4 CITY - S	1 - ZIP		Change Addition
TITLE			PLLLIL	5.1 TITLE			C Online
NAME OTOGET ADDRESS				5.2 NAME	ADDRESS		
STREET ADDRESS				5.3 STREET			
CITY-ST-ZIP			DELETE	5.4 CITY - S' 6.1 TITLE	I+ZIF		Change Addition
TITLE		L	DELL'E	6.2 NAME			
NAME OTDERT ADDRESS				6.3 STREET	ADDRESS		
			6.4 CITY - S				
CITY-ST-ZIP	<u> </u>			0.40111.9	1-61/		

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 an an attachment with an address.

1011-10 - End 1 Wilson - Oras - Am 3/10/9V 502-3/18/88

CR2E034 (10/97

**FILED** 

Mar 25 1998 8:00am

Secretary of State