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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G48898

1. Corporation Name

Principal Place of Business

DENCO CONSTRUCTION, INC.

FILED Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90030 005 ***150.00



4600 CUMMINS FORT MYERS FI US 2. Principal Pli 21 Suite, Apt. 4 22	## 600 CUMMINS COURT		NNIS H. BUBAR IMMINS COURT YERS FL 33905 ling Address ie, Apt. #, etc. / & State Country 30			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 07/11/1983 4. FEI Number			
	9. Name and Address of Curren	t Registered Agent	81			10. Name and Address of New R	tegistered	Agent	
BUBAR, DENNIS H.					Name				
4600 CUMMINS COURT			82	82 Street Address (P.O. Box Number is Not Acceptable)					
FORT MYERS FL 33905			83	╫					
			84	۱,	City			85 Zip	p Code
					City		FL	-	
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			13.			ADDITIONS/CHANGES TO OF	FICERS AN	1D DIRECT	ORS IN 12
TITLE			1,1 TITLE	1.1 TITLE 1.2 NAME				Change	e 🗌 Addition
NAME			1.2 NAME						į
STREET ADDRESS	4600 CUMMINS COURT		1.3 STREET ADDRESS		DDRESS				j.
CITY-ST-ZIP	FT MYERS, FL 00000		1.4 CITY-ST-ZIP		ZIP				
TITLE	DV .	☐ DELETE	2.1 TITLE					Change	e Addition
NAME	BUBAR, RODNEY J		2.2 NAME						
STREET ADDRESS	4600 CUMMINS COURT		2 3 STREI		DORESS				1
CITY-ST-ZIP	FORT MYERS FL		2. 4 CITY		ZIP			☐ Change	e
TITLE	DST	☐ DELETE	3.1 TITLE					[] Criange	3 C Addison
NAME	BUBAR, ROBERT H		3.2 NAME						
STREET ADDRESS	4600 CUMMINS COURT		3.3 STREE						
CITY-ST-ZIP	FORT MYERS FL	☐ DELETE	3.4. CITY- 4.1 TITLE	ST-2	ZIP			Change	e Addition
TITLE		□ SCEETE	4.1 THE						
NAME				.3 STREET ADDRESS					}
STREET ADDRESS	I i i i i i i i i i i i i i i i i i i i			CITY-ST-ZIP					
CITY-ST-ZIP			5.1 TITLE			•		☐ Chang	e Addition
NAME		,	5.2 NAME					4	
STREET ADDRESS			5.3 STREE	T AC	DDRESS				
CITY-ST-ZIP			54 CITY-1	ST-Z	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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

□ DELETE

SIGNATURE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

03/01/99

941-332-4400

Change

Addition