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May 07 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # G74038

(2)

1. Corporation Name

JANKE CONSTRUCTION INC.

Principal Place of Business

15 ABBEY DRIVE
POST OFFICE BOX 1918
DADE CITY FL 33525-8112

Mailing Address

15 ABBEY DRIVE
POST OFFICE BOX 1918
DADE CITY FL 33525-8112

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/09/1983

4. FEI Number

58-1537102

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$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

2a. Mailing Address

21

26

Suite, Apt. #, etc

Suite, Apt. #, etc

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JANKE, JERRY
15 ABBEY DRIVE
DADE CITY FL 34297

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

12540 Abbey Drive

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.01(2) 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 OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME JANKE, JERRY
STREET ADDRESS 15 ABBEY DRIVE
CITY- ST- ZIP DADE CITY FL

☐ DELETE

TITLE VP
NAME SCHMIRLER, ROBERT
STREET ADDRESS 2003 MOORE DRIVE
CITY- ST- ZIP DADE CITY FL

☐ DELETE

TITLE STD
NAME JANKE, CAROL J.
STREET ADDRESS 15 ABBEY DRIVE
CITY- ST- ZIP DADE CITY FL

☐ DELETE

TITLE D
NAME GOTTSCHALK, WILLIAM K.
STREET ADDRESS 1000 ARNOLD ST.
CITY- ST- ZIP ROTHSCHILD WI

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

12540 Abbey Dr.

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

12325 Leanne Dr.

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

12540 Abbey Dr

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

8107 South Ridge Dr

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- 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.

SIGNATURE

Jerry Janke

4/28/98 352-567-0656

CR2E034 (10/97)