

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **G74344** (4)

1. Corporation Name
JACK PARKER SOUTHEAST CONSTRUCTION, INC.

Principal Place of Business
**6296 CORPORATE COURT
SUITE A101
FT. MYERS FL 33919**

Mailing Address
**6296 CORPORATE COURT
SUITE A101
FT. MYERS FL 33919**



3. Date Incorporated or Qualified **12/16/1983** 3a. Date of Last Report **04/28/1995**

2. Principal Place of Business
21 **9400 GLADIOLUS DRIVE**
Suite, Apt. #, etc.
22 **SUITE 250**
City & State
23 **FT MYERS FL**
Zip
24 **33908** Country
25 **USA**
2a. Mailing Address
26 **9400 GLADIOLUS DRIVE**
Suite, Apt. #, etc.
27 **SUITE 250**
City & State
28 **FT MYERS FL**
Zip
29 **33908** Country
30 **USA**

4. FEI Number **59-2388563** 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 has liability for intangible tax under s 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MITCHELL, STEPHEN J.
201 N FRANKLIN STREET, STE 2100
TAMPA FL 33602**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

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	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
D	PARKER, JACK	2800 S. OCEAN BLVD.	BOCA RATON FL	<input type="checkbox"/>
D	TURKEN, WALTER D	6296 CORPORATE COURT, SUITE A-101	FT MYERS FL	<input type="checkbox"/>
D	GLICK, ADAM	104-70 QUEENS BLVD	FOREST HILLS NY	<input type="checkbox"/>
V	GULLO, VINCENT	6296 CORPORATE CT. SUITE A101	FT. MYERS FL	<input type="checkbox"/>
V	KNIZNER, DAVID	6296 CORPORATE CT. SUITE A101	FT. MYERS FL	<input type="checkbox"/>
V	STELLING, SARA L.	6296 CORPORATE CT., SUITE A-101	FT. MYERS FL	<input checked="" type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	<input checked="" type="checkbox"/>	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID KNIZNER

1/21/96 911-401-5040

CR2E034 (12/95)

4-30-90