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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90188 041 \*\*\*150.00

## **DOCUMENT # G84454** 1. Corporation Name

DOUG MYERS, CONSTRUCTION, INC.

| Principal Place                                              | e of Business                                                                                                                | Mailing Address                                          |                                                          |                      |                                                                                                                   | it 81811 Blått Blått 1891              |     |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|----------------------------------------------------------|----------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------------|-----|
| 6106 91ST ST                                                 | EAST                                                                                                                         | 6106 91ST ST EAST                                        |                                                          |                      |                                                                                                                   |                                        |     |
| · · · · · · · · · · · · ·   - · · · ·                        |                                                                                                                              | P.O. BOX 20086                                           |                                                          |                      | DO NOT WRITE IN THIS SPA                                                                                          | CF.                                    |     |
| BRADENTON FL                                                 | L 34203                                                                                                                      | BRADENTON FL 34203                                       |                                                          | -,                   | Date Incorporated or Qualified                                                                                    |                                        | 7   |
|                                                              |                                                                                                                              |                                                          |                                                          |                      | 02/13/1984                                                                                                        |                                        | }   |
| 2. Principal P                                               | lace of Business                                                                                                             | 2a. Mailing Address                                      |                                                          |                      | 4. FEI Number                                                                                                     | Applied For                            | 7   |
| 21                                                           |                                                                                                                              | 26                                                       |                                                          |                      | 59-2371813                                                                                                        | Not Applicable                         |     |
| Suite, Apt.                                                  | #, etc.                                                                                                                      | Suite, Apt. #, etc.                                      |                                                          |                      | 5 Cortifects of Status Desired                                                                                    | 3.75 Additional                        |     |
| 22                                                           |                                                                                                                              | 27                                                       |                                                          |                      | 3. Germone of Claus Besires                                                                                       | Fee Required                           | _   |
| City & Stat                                                  | e .                                                                                                                          | City & State                                             |                                                          |                      |                                                                                                                   | 5.00 May Be                            |     |
| 23                                                           |                                                                                                                              | 28                                                       |                                                          |                      |                                                                                                                   | Added to Fees                          | -   |
| Zip                                                          | Country                                                                                                                      | <b>⊢</b>                                                 | ountry                                                   |                      | 8. This corporation owes the current year Intangible Personal Property Tax.                                       | _                                      |     |
| 24                                                           | 9. Name and Address of Current                                                                                               | 29 30 30                                                 | T                                                        |                      | 10. Name and Address of New Registered Agen                                                                       |                                        | 1   |
|                                                              | 3. Harrie and Address of Outrent                                                                                             | registered Agent                                         | 81                                                       | Name                 |                                                                                                                   |                                        | 7   |
| MYE                                                          | RS, DOUG 🤼 👙 🖫                                                                                                               |                                                          | -                                                        | C44 A 4 4            | (D.O. Day Number is Not Assembly)                                                                                 |                                        | -   |
| 6106 91ST ST. EAST                                           |                                                                                                                              |                                                          | 82                                                       | Street Addre         | ess (P.O. Box Number is Not Acceptable)                                                                           |                                        |     |
| BRAI                                                         | DENTON FL 34203                                                                                                              |                                                          | 83                                                       |                      |                                                                                                                   |                                        |     |
|                                                              |                                                                                                                              |                                                          | 84                                                       | Citv                 | 85                                                                                                                | Zip Code                               | -{  |
|                                                              |                                                                                                                              |                                                          | -                                                        |                      | FL                                                                                                                |                                        |     |
| office or n                                                  | to the provisions of Sections 607.0502 registered agent, or both, in the State of familiar with, and accept the obligations. | of Florida. Such change was authoriz                     | ed by i                                                  | ine corporatio       | oration submits this statement for the purpose of chang<br>n's board of directors. I hereby accept the appointmen | ging its registered<br>t as registered |     |
| SIGNATURE                                                    | ·                                                                                                                            |                                                          |                                                          |                      | · · · · · · · · · · · · · · · · · · ·                                                                             | <u> </u>                               |     |
|                                                              | Signature, typed or printed name of registered agent OFFICERS AND                                                            |                                                          | red Ageri                                                | t signature required | when reinstating)  DATE  ADDITIONS/CHANGES TO OFFICERS AND DII                                                    | RECTORS IN 12                          | - 6 |
| 12.                                                          | PS OFFICERS AND                                                                                                              |                                                          | J.<br>I TITLE                                            | <del></del>          |                                                                                                                   | hange                                  | n 3 |
| NAME                                                         | MYERS, DOUGLAS                                                                                                               |                                                          | NAME                                                     |                      | _                                                                                                                 | • –                                    |     |
| STREET ADDRESS                                               | 6106 91ST ST. EAST                                                                                                           |                                                          |                                                          | ADDRESS              |                                                                                                                   |                                        | {   |
| CITY-ST-ZIP                                                  | BRADENTON FL                                                                                                                 |                                                          | CITY-ST                                                  | - 1                  |                                                                                                                   |                                        | }   |
| TITLE                                                        | TD                                                                                                                           |                                                          | TITLE                                                    |                      |                                                                                                                   | Change Additio                         | n c |
| NAME                                                         | MYERS. DOUGLAS                                                                                                               | 2.3                                                      | NAME                                                     |                      |                                                                                                                   |                                        |     |
| STREET ADDRESS                                               | 6106 91ST ST. EAST                                                                                                           | 2.3                                                      | STREET                                                   | ADDRESS              |                                                                                                                   |                                        |     |
| CITY-ST-ZIP                                                  | BRADENTON FL                                                                                                                 | 2.                                                       | 4 CITY-S                                                 | T-ZIP                |                                                                                                                   |                                        | _   |
| TITLE                                                        |                                                                                                                              | ☐ DELETE 3.                                              | TITLE                                                    |                      |                                                                                                                   | hange                                  | ก   |
| NAME                                                         |                                                                                                                              |                                                          | NAME                                                     |                      |                                                                                                                   | •                                      |     |
| STREET ADDRESS                                               |                                                                                                                              | 3.2                                                      |                                                          | I                    |                                                                                                                   |                                        |     |
| STREET ADDRESS                                               |                                                                                                                              |                                                          | STREET                                                   | ADDRESS              |                                                                                                                   |                                        |     |
| CITY-ST-ZIP                                                  |                                                                                                                              | 3.3                                                      | LCITY-S                                                  |                      |                                                                                                                   | D                                      |     |
| CITY-ST-ZIP                                                  |                                                                                                                              | 33.<br>34.<br>DELETE 4.                                  | I. CITY-8'                                               |                      | ·                                                                                                                 | Change                                 | n   |
| CITY-ST-ZIP                                                  |                                                                                                                              | 3.3.3.4 3.4 4.4 4.4 4.4 4.4 4.4 4.4 4.4                  | I. CITY-S'<br>I TITLE<br>2 NAME                          | T- ZIP               |                                                                                                                   | Change Addition                        | n   |
| CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS                     |                                                                                                                              | 3.3.3.4<br>DELETE 4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4. | I. CITY-S'<br>I TITLE<br>2 NAME<br>3 STREET              | T-ZIP ADDRESS        |                                                                                                                   | Change Addition                        | n   |
| CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP        |                                                                                                                              | 3.3<br>3.6<br>DELETE 4.4<br>4.4                          | I. CITY-S'<br>I TITLE<br>2 NAME<br>3 STREET<br>I CITY-ST | T-ZIP ADDRESS        |                                                                                                                   |                                        |     |
| CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE |                                                                                                                              | 3.3.3.4 3.4 4.4 4.4 4.4 4.4 4.4 4.4 4.4                  | I. CITY-S'<br>I TITLE<br>2 NAME<br>3 STREET              | T-ZIP ADDRESS        |                                                                                                                   | Change Addition                        |     |
| CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP        |                                                                                                                              | 3.3.3.4.3.4.4.4.4.4.4.4.4.5.5.5.5.5.5.5.                 | I TITLE  NAME STREET CITY-ST TITLE NAME                  | T-ZIP ADDRESS        |                                                                                                                   |                                        |     |

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, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

DELETE

756-8720

☐ Addition

☐ Change