**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # CO1202

## Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90087 045 \*\*\*158.75

1. Corporation							
ROBERT	L. SELPH GENERAL CONT	TRACTOR, INC.					
1							
Principal Place of Business Mailing Address						BIBRI BIBIL BRBIT I	
7250 SADDLE GREEK CIRCLE 7250 SADDLE CREEK CIRCLE							
SARASOTA FL 34241 SARASOTA FL 34241					DO NOT WRITE IN THIS SPACE		
	:				3. Date Incorporated or Qualifed		
					03/14/1984		
2. Principal PI	ace of Business	2a. Mailing Address			4. FEI Number	Ar	pplied For
26					59-2304077		ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	\$8.75	
27			_			Fee Re	
City & State City & State.					-6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added	May Be
23 Zip	Zip Country Zip		Country		This corporation owes the current year limits to the current year limi		
24	25 29 30		¬ `		Personal Property Tax.	X☐Yes	□No
24	9. Name and Address of Currer				10. Name and Address of New Registere	Agent	
			81	Name	•		,
	N, JEROME S ESQ.	-	82	Street Addr	ress (P.O. Box Number is Not Acceptable)	<del></del>	
1680 FRUITVILLE RD.							
	E 102		83				1
SAH	ASOTA FL 34236		84	City		85 Zip	Code
				L	F		registered
11. Pursuant office or reagent. La	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	02 and 607.1508, Florida Statutes, t of Florida. Such change was autho ations of, Section 607.0505, Florida	rized by Statutes	e-named corp the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the app	ointment as re	egistered
SIGNATURE							
	Signature, typed or printed name of registered age		istered Ager 13.	nt signature require	ADDITIONS/CHANGES TO OFFICERS	ND DIRECTO	ORS IN 12
12. πιε	P OFFICERS AF	OFFICERS AND DIRECTORS 13			Application of the control of the co	☐ Change	Addition
NAME	SELPH, ROBERT L		1,2 NAME				
STREET ADDRESS	7250 SADDLE CREEK CIR.			T ADDRESS			j
CITY-ST-ZIP	SARASOTA FL 34241		1,4 CITY-\$		_		
TITLE	TS	☐ DELETE	2,1 TITLE			☐ Change	☐ Addition
NAME	SELPH, ANN M		2.2 NAME				}
STREET ADDRESS	7250 SADDLE CREEK CIR.			TADDRESS			
CITY-ST-ZIP	SARASOTA FL 34241		2. 4 CITY-5	ST-ZIP		- <b>-</b> -	T A delica
TITLE	•	☐ DELETE	3.1 TITLE			☐ Change	☐ Addition
NAME			3.2 NAME				\ 
STREET ADDRESS				TADORESS			ļ
CITY-ST-ZIP			3.4. CITY-5 4,1 TITLE	ST-ZIP		Change	Addition
TILE		M DETELL	4,3 (NCE 4, 2 NAME				
NAME			4.3 STREET ADDRES				
STREET ADDRESS			4.3 STREE				İ
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE	· -"		Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5,3 STREE	TADDRESS			]
CITY-ST-ZIP			5.4 CITY-S	T-ZiP			
TITLE			6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME		1		
	RESS COLUMN TO THE STATE OF THE		6.3 STREE	TADDRESS	<b>\</b>		ļ

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 of 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.

SIGNATURE:

Robert L. Selmarch 13, 1999

941 922-6936