

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

PROFIT
CORPORATION
ANNUAL REPORT

1996



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

DOCUMENT # H11403 (3)

1. Corporation Name:

NICK SCHNEIDER CONSTRUCTION, INC.



Principal Place of Business:

967 BAYSHORE DRIVE
TARPON SPRINGS FL 34689

Mailing Address:

967 BAYSHORE DRIVE
TARPON SPRINGS FL 34689

2. Principal Place of Business:

21 3012 Arbor Oaks Dr.
Suite Apt. #101

22

City & State:

23 Tarpon Springs FL

24

Zip:

34689

25 Pinellas

2a. Mailing Address:

26 3012 Arbor Oaks Dr.
Suite Apt. #101

27

City & State:

28 Tarpon Springs FL

29

Zip:

34689

30 Pinellas

9. Name and Address of Current Registered Agent

SCHNEIDER, NICHOLAS
967 BAYSHORE DRIVE
TARPON SPRINGS FL 34689

3. Date Incorporated or Created:
07/06/1984

3a. Date of Last Report:
04/20/1995

4. FID Number:
59-2426361

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 is not liable for filing biennial reports under s. 199.032,
Florida Statutes. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name: Schneider, Nicholas

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

83 3012 Arbor Oaks Dr.

84

City:

Tarpon Springs

FL

Zip Code:

34689

11. Pursuant to the provisions of Sections 199.031 and 199.032, Florida Statutes, this corporation hereby certifies that the information furnished in this report is true and accurate and that the corporation is not liable for filing biennial reports under s. 199.032, Florida Statutes.

SIGNATURE:

Nicholas R. Schneider

4-1-96

12. OFFICERS AND DIRECTORS:

TITLE:

NAME:

STREET ADDRESS:

CITY, ST, ZIP:

TITLE:

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STREET ADDRESS:

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NAME:

STREET ADDRESS:

CITY, ST, ZIP:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12:

☒ Change ☐ Addition

3012 Arbor Oaks Dr.,
Tarpon Springs FL 34689

3012 Arbor Oaks Dr.,
Tarpon Springs, FL 34689

14. I do hereby certify that the information supplied herein is true and accurate and that my signature shall have the same legal effect and that my name appears in Block 12 of this report as required by Chapter 667, Florida Statutes, and that my name appears in Block 12 of this report as required by Chapter 667, Florida Statutes.

SIGNATURE: Nicholas R. Schneider Nicholas R. Schneider 4-1-96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(813)938-5063

CR2E034 (12/95)