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

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	
DOCUMENT #	H2227

(0)

FILED Jan 20 1998 8:00am Secretary of State

12-30-97 9044715890

TULLY	BUILDERS INC.				
				TO THE STATE OF THE PARTY OF THE PARTY OF THE PARTY AND TH	İ
					1
X 200	e of Business'	Mailing Address			
PO 80X 4290		PO BOX 4290 5115 MEDORAS AVE			
5115 MEDORA ST. AUGUSTII		ST. AUGUSTINE FL 32089	i	DO NOT WRITE IN THIS SPACE	
, 3, 3, 3, 5	1			3. Date Incorporated or Qualified : 1	
				09/24/1984	1
	lace of Businoss	2a. Mailing Address		4. FEI Number Applied For	r
21		26		59-2516689 Not Applica	able
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5, Certificate of Status Desired Status Desired	a
22		27		Fed Required	
City & State	5	City & State		6. Election Campaign Financing \$5.00 May Be	
Z _I p	Country	28	Country	Trust Fund Contribution Added to Fees	
24 Zip	25	├ ., '	30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	}
24	g, Name and Address of Current		301	10. Name and Address of New Registered Agent	
T()(LLY, BARRY NEIL		81 Name	A00	{
	IS MEDORAS AVENUE			ARRY NEIL IULLY	
	AUGUSTINE FL 32085		82 Street Add	ress (P.O. Box Number in Not Acceptable)	{
51.	ACCOUNTE LE CECCO		83	AVISIZI CIRCUL	
				·	
			84 City A.	JGUSTINE FL 85 Zip Code 320 BL	1_
11. Pursuant l	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	es, the above-named corp	poration submits this statement for the purpose of changing its registe	led
office or re	egistered agent, or both, in the State of	of Florida, Such change was a	uthorized by the corpora	poration submits this statement for the purpose of changing its register lion's board of directors. I hereby accept the appointment as registere	∋d
	* *	ons of, beoligh our loads, the	riga statutes.		}
SIGNATURE	Signature, typed or printed name of registered agran	and the if applicable [NO16	Registered Agent signature requi	red when roinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE .	DPV	☐ DELETÉ	11 TOTALE	Change Add	lition
NAME	TULLY, BAR NEIL	4	1.2 NAME		ļ
STREET ADDRESS	5115 MEDORAS AVE		1.3 STREET ADORESS]
CITY-ST-ZIP	ST. AUGUSTINE FL		1.4 CITY-S1 - ZIP		
TITLE	5	, XI DELETE	2.1 TITLE	Change Add	ition
NAME	TULLY, SUSAN F.	•	2.2 NAME		}
STREET ADDRESS	5115 MEDORAS AVENUE		2.3 STREET ADDRESS		- }
CITY-ST-ZIP	ST. AUGUSTINE FL	D MIST	2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	31 1111.6	[_] Change [_] Add	лиоп
NAME			3.2 NAMI		
STREE1 ADDRESS		T.	3 3 STREET ADDRESS		}
DITY-ST-ZIP		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	Change Add	fition
TITLE		La Dietit	4.2 NAME	Li Ottange Li Nou	ciuli
NAME :		i	4. 2 NAME 4.3 STREET ADDRESS		1
STREET ADDRESS	,•	į			
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	Change Add	lition
NAME		[] Delete	5.2 NAME	in orange in red	.,
STREET ADDRESS			5.3 STREET ADDRESS		Ì
ľ			1		}
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	☐ Change ☐ Add	l lition
NAME]		Cotten	6.2 NAME	C Stigning C 7 Made	
		i	6.3 STREET ADDRESS		
STREET ADDRESS			E 1		{
CITY-ST-ZIP	ertify that the information supplied will	h this filing does not qualify fo	f the exemption stated in	Section 119.07(3)(i), Florida Statutes. I further certify that the informat	tion
indicated	on this annual report or supulemental	annual report is true and accu	urate and that my signalu	ire shall have the same legal effect as it made under gath: that I am ai	n I
Block 12	or Block 13 if charged or on an attac	nment with an address	socote tris report as feq	uired by Chapter 607, Florida Statutes; and that my name appears in	ļ