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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H31477

GODWIN CONSTRUCTION, INC.

(3)

## FILED Mar 03 1997 8:00am Secretary of State

Ш		1811 II BA 1986	<b>                 </b>	BIAK EIRH BIS	

De valor Dr.	on of Di cinore	Mailing Address				<u> </u>				
Principal Place of Business Mailing Address										
10001 BLUEFIE OKEECHOBEE		10001 BLUEFIELD RD. OKEECHOREE EL 3497249	10001 BLUEFIELD RD. OKEECHOBEE FL 34972-9013							
US	TE SHOTE	US	NI S							
						3. Date Incorporated or Qualified	Report			
2. Principal Place of Business 2a. Mailing Address						11/27/1984 4. FEI Number	04/26/1996			
—¬	riacq or business				59-2477433			Applied For		
21 Suite, Apt	# etC	Suite, Apt. #, etc.						Not Applicable Additional		
22	F, 0.0	27 Crty & State			5. Certificate of Status Desired		Fee Required			
City & Sta	ite				6. Election Campaign Financing		5.00 May Be			
23		28			Trust Fund Contribution Added to Fees					
Zip	Country	Zip	Cou	intry		8. This corporation has liability for in			s. 199.032,	
4	25	29	30				Yes [	T		
	9. Name and Address of Curr	ent Registered Agent		<u> </u>		10. Name and Address of New Reg	istered A	gent		
	DWIN, CARL C.			81	Name					
	01 BLUEFIELD ROAD					Address (P.O. Box Number is Not Acceptable)				
OK	EECHOBEE FL 34972			83						
				83						
				84	City		P** 1	85 Zig	p Code	
					<u> </u>	poration submits this statement for the pution's board of directors. I hereby accept	FL			
12.	OFFICERS A	ND DIRECTORS	13.	TL F		ADDITIONS/CHANGES TO OFFICE		DIRECTO		
THILE	\ <b>-</b> '	DELETE	1.1 TI	TLE				☐ Change	Addition	
NAME	GODWIN, CARL C.		1.2 N							
STREET ADDRESS	10001 BLUEFIELD RD. OKEECHOBEE FL				ADDRESS					
CITY - ST - 7/P	VD VD	DELETE			T-ZIP			Change	Addition	
TITLE	GODWIN, SANDRA L.	□ nercit	2.1 1		\			Change	Augilion	
NAME STREET ADDRESS	40004 DILIERED DD		2.2 N		ADDRESS					
CITY-ST-Z-P	OKEECHOBEE FL				ST-ZIP					
Talle	VP	DELETE	31 TI		11-211			Change	Addition	
NAME	GODWIN, CARL J	••	32 N	AME				·		
STREET ADDRESS	4055 MIAMI AVE		335	TAEET	ADDRESS					
CITY - ST - ZIP	W MELBOURNE FL		3 4. 0	ITY - S	ST-ZIP					
THILF	, , , , , , , , , , , , , , , , , , , ,	DELETE	4.1 T					☐ Change	Addition	
NAME			4.21	AME						
STREET ADDRESS			4.3 \$	TREET	ADDRESS					
CITY+ST-ZIP			4.4 C	ITY-S	it-ZIP					
TITLE		DELETE	5 1 TI	TLE	Ţ	<del></del>	_ 7	Change	Addition	
NAME			5.2 N	AME	1					
STREET ADDRESS			5.3 S	TREET	ADDRESS					
CITY - ST - ZIP				*****	I-ZIP				<del></del>	
THILE		DELFTE	6.1 To				l	Change	e 🔲 Addition	
NAME			6.2 N		Ì					
STREET ADDRESS					ADDRESS					
CITY: ST-ZiP	1		64C	ITY-S	T-21P					

14. I do 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 opinged, or on an attachment with an address.

SIGNATURE:

941-357-0454 Daytime Phone #