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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H43394

Principal Place of Business

F & W CONSTRUCTION, INC.

FILED
Apr 19, 1999 8:00 am
Apr 19, 1999 8:00 am Secretary of State
04-19-1999 90054 033 ***150.00

1922 FIELD RD P.O. BOX 21444 SARASOTA FL 34231 SARASOTA FL 34276 US							DO NOT WRITE IN T	118 8	PAC	E	
	•						3. Date incorporated or Qualified 02/19/1985				
2. Principal Place of Business 2a. Mailing Address							4. FEI Number			App	lied For
21		26					59-2552371			Not	Applicable
Suite, Apt. :	#, etc.	27	Suite, Apt. #, etc.			-	5. Certificate of Status Desired		• -	. 75 A	dditional juired
City & State	· · · · · · · · · · · · · · · · · · ·	28	City & State		_	· ·	6. Election Campaign Financing Trust Fund Contribution	¯.` 		.00° l	May Be Fees
Zip	Country 25	Zip Country 30				8. This corporation owes the current year Intangible Personal Property Tax.					
	9. Name and Addres	29 ss of Current Regis	stered Agent				10. Name and Address of New Register	ed A	gent		
				. [8	31	Name					
WEBER, CHARLES J. 1922 FIELD RD					32	Street Addr	ress (P.O. Box Number is Not Acceptable)				<u>.</u>
SAR	ASOTA FL 34231			1	В3						
				1	84	City		 -L	85	Zip C	ode
									hana	ing its	registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											
SIGNATURE Signature, trood or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
12.	O	FFICERS AND DIRE	ECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	ANE			
TITLE	PSTD		☐ DELETE	1.1 TITL	E				C	nange	Addition
NAME	WEBER, CHARLES	J.		1.2 NAM	Æ						
STREET ADDRESS	1922 FIELD ROAD			1.3 STR	EET.	ADDRESS					
CITY-ST-ZIP	SARASOTA FL			1.4 CITY	<u>′-S</u> T	-ZIP					
TITLE			☐ DELETE	2.1 TITL	E				CI	nange	☐ Addition
NAME.				2.2 NAM	Æ						
STREET ADORESS				2.3 STR	EET	ADDRESS					
CITY-ST-ZIP -				. 2.4 CIT	Y-\$7	T- ZIP					
TITLE			☐ DELETE	3.1 TTT.	E				C	nange	☐ Addition
NAME				3.2 NAM	Æ	1					
STREET ADDRESS				3.3 STR	EET	ADDRESS					
CITY-ST-ZIP				3.4. CIT	Y-\$1	T-ZIP					
TITLE			☐ DELETE	4.1 TITE	E				□c	nange	☐ Addition
NAME				4. 2 NAJ	ME						
STREET ADDRESS				4.3 STR	EET	ADDRESS					
CITY-ST-ZIP				4.4 CIT	Y-ST	r-ZIP					
TITLE			☐ DELETE	5.1 TITL		_				nange	☐ Addition
NAME				5.2 NAN	Æ						
STREET ADDRESS				5.3 STR	EET	ADDRESS					
CITY-ST-ZIP .		tage a	<u> </u>	5.4 CITY		r-ZIP					
TITLE			DELETE	6.1 TITL			•			nange	☐ Addition
NAME .				6.2 NAX].					
STREET ADDRESS				6.3 STR	EET	ADDRESS					

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, open an attachment with an address, with all other like empowered. CITY-ST-ZIP

SIGNATURE: 2

CR2E034 (11/98)