

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # H46791 (0)

1. Corporation Name

SANZONE CONSTRUCTION, INC.

Principal Place of Business

Mailing Address

~~328 PINE RANCH TR  
P O BOX 308  
OSPREY FL 34229-7308~~

~~328 PINE RANCH TR  
P O BOX 308  
OSPREY FL 34229-7308~~



2. Principal Place of Business

2a. Mailing Address

21 400 E. VENICE AVE

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 VENICE FL

27 P.O. BOX 308

City & State

City & State

23 FL

28 OSPREY FL

Zip

Country

Zip

Country

24 34292

25

29 34229-0308

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

03/13/1985

04/13/1995

4. FEI Number

59-2507957

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 has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

WM JEFFERSON

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

400 E. VENICE AVE

83

84 City

VENICE

FL

85 Zip Code

34292

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:

WM J. Jefferson

Signature, typed or printed name of registered agent and not applicable

(NOTE: Registered Agent signature required when reinstating)

4-26-96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	SANZONE, PHIL	
STREET ADDRESS	328 PINE RANCH TR	
CITY-ST-ZIP	OSPREY FL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	SANZONE, SANDRA	
STREET ADDRESS	328 PINE RANCH TR	
CITY-ST-ZIP	OSPREY FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	S.T. P.
2.3 STREET ADDRESS	SANZONE, S.R.
2.4 CITY-ST-ZIP	400 E. VENICE AVE
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	VENICE FL 34292
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	700001835801
5.3 STREET ADDRESS	-05/23/96--01006--025
5.4 CITY-ST-ZIP	***200.00
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, or on an attachment with an address.

SIGNATURE:

Sandra R. Sanzone

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/96

DATE

Daytime Phone #

CP2E034 (12/95)