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

PROFIT
CORPORATION
ANNUAL REPORT
1997

NAME

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H57234

(7)

PORT SQUARE CONSTRUCTION, INC.

FILED
May 16 1997 8:00am
Secretary of State

- 1 (18 6) 3 (18 (18 (18 6) 18 6) 18 6) 18 60 18 (18 6) 18 (18 (18 6) 18 (18 6) 18 (18 6) 18 (18 6) 18 (18 6)

Principal Place	e of Business	Mailing Address		T (4 bidit diet districted pint diet stein pint diet stein pint diet auch pint bigit eintrich
18167 US HWY 18 N 660 CLEARWATER FL 34824-3589 US		18167 US HWY 19 N	:	
		660 OLEADWIATED EL 04004 6500		
		CLEARWATER FL 34624-6569 US	:	3. Date Incorporated or Qualified 3a. Date of Last Report 05/13/1985 05/01/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		59-2525680 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired XX \$8.75 Additional Fee Required
City & Stat	9	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip 24	Country 25	Zip 3	Country 0	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes
	g, Name and Address of Curren			10. Name and Address of New Registered Agent
JOH	INSON, R. KELLEY		81 Name	
18167 US 19 N #300			82 Street Add	dress (P.O. Box Number is Not Acceptable)
660			51 61/61/100	ACCOUNT OF THE THE THE TOTAL OF THE
CLE	ARWATER FL 34624		83	
. •			84 City	■ 85 Zip Code
			'	┣<u>┖</u> │ │ `
SIGNATURE	Signature, typed or printed name of registered age	nt and little if applicable (NOTE	Registered Agent signature requ	rporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered outed when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DT	☐ DELETE	1.A TITLE	Change Addition
NAME	JOHNSON, RICHARD C.		1.2 NAME	
STREET ADDRESS	18167 US HWY 19 N 660		1,3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL		1.4 CITY-ST-ZIP	
TITLE	DP	DELETE	2.11 TITLE	Change Addition
NAME	JOHNSON, R. KELLEY		2.2 NAME	
STREET ADDRESS	18167 US 19 N 660		2,3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL DS	DELETE	2.4 CITY-ST-ZIP	Change Addition
TITLE	EZELL, NEIL	L DECCIE	3)1 TITLE 32 NAME	L. Change L. Audition
NAME STREET ADDRESS	18167 US HWY 19 660		32 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL		33 STREET ADDRESS	
TITLE		DELETE	4,1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4,3 STREET ADDRESS	
CITY-ST-ZIP			4 4 CITY-ST-ZIP	
TITLE		☐ DELET E	5,1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5,3 STREET ADDRESS	
CITY-ST-ZIP			5 4 CITY-ST-ZIP	
TITLE	1	□ DELETE	6,1 TITLE	☐ Change ☐ Addition

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 changed, or on an attachment with an address.

63 STREET ADDRESS

62 NAME

R. KELLEY JOHNSON

4/30/97 (813) 530-5522