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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # H59865**

THE CC	ONSTRUCTION COMPANY (	OF PENSACOLA, INC.						
Principal Place of Business Mailing Address					1 (89/01/ 0/9/ 0/10/ 10/10/ 10/10/			1(4t) B1811 1881
6706 N 9TH AVE D-3 (32504) 6706 N 9TH AVE D-3 (32504) P O BOX 10729 P O BOX 10729			504)		20 407 147	NTC 451 THE		
PENSACOLA F	-L 32524	PENSACOLA FL 32524			DO NOT WE		SPACE	
					3. Date Incorporated or Qualife 05/28/1985			
2. Principal I	Place of Business	2a. Mailing Address			4. FEI Number		Ap	plied For
21		26		59-2852364			t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	ate of Status Desired			
City & State		City & State		6. Election Campaign Financing	)	\$5.00	May Be	
23		28		Trust Fund Contribution	' 0	Added	to Fees	
Zip	Country	Zip	Country	<i>†</i>	8. This corporation owes the cu	rrent year In	V-7	
24	25	29	30		Personal Property Tax.		Yes	□No
	9. Name and Address of Curre	nt Registered Agent	81	Name	10. Name and Address of New	Registered	Agent	
	ROCO, JAMES H. JR.		82		ress (P.O. Box Number is Not Accep	tahla)		
	6°N. NINTH AVE. )G. D-1				ress (F.O. DOX Humber is Not Accep	ti.		1 (0) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	NSACOLA FL 32504		83					
			84	City		FL		Code
Charles (Charles)	t to the provisions of Sections 607.05	02 and 607 1500 Florida Ctat.	des the short		possion submits this statement for th		shanaina ita	rogistored
office or agent. I	registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such change was lations of, Section 607.0505, Fl	authorized by orida Statute:	the corporati	on's board of directors. I hereby acc	ept the appoi	intment as re	gistered
SIGNATURE								
40	Signature, typed or printed name of registered ag			nt signature require	ad when reinstating)  ADDITIONS/CHANGES TO O	DATE	וח חוחברבר	DC IN 12
TITLE	VP OFFICERS A	ND DIRECTORS  ☐ DELETE	13.		ADDITIONS/CHANGES TO O	FFICERS AI	Change	Addition
NAME	BAROCO, J. H. JR.		1.2 NAME		* # * * * * * * * * * * * * * * * * * *		□ change	
STREET ADDRESS	6700 MODTH OTH AVENUE			TADDRESS				
	PENSACOLA FL		1.4 CITY-5					
CITY-ST-ZIP TITLE	VD	☐ DELETE	2.1 TITLE	51-2IF			Change	Addition
NAME	EMMANUEL, P.G.		2.2 NAME			.*	;	_
STREET ADDRESS	OO O ODDING OT			T ADDRESS				
CITY-ST-ZIP	PENSACOLA FL		2. 4 CITY-			-		
TITLE NO.	SD	☐ DELETE	3.1 TITLE				Change	Addition
NAME	GREENHUT, DUDLEY H.		3.2 NAME					
STREET ADDRESS	23 S A STREET		3.3 STREE	TADORESS	4.5	41,.	1. 1	6. 1. 15 BE
CITY-ST-ZIP	PENSACOLA FL		3.4. CITY-	ST-ZIP			1. 1. 1. 1. 1.	
TITLE	D	☐ DELETE	4.1 TITLE			est Six Citi	Change	Addition
NAME	KIRKLAND, L.J.		4. 2 NAME					
STREET ADDRESS	1		4.3 STREE	T ADDRESS				
CITY-ST-ZIP	PENSDACOLA FL		4.4 CITY-S	IT-ZIP			<u> </u>	
TITLE	D	☐ DELETE	5.1 TITLE			<b>\</b>	☐ Change	Addition
NAME	NOONAN JR, WILLIAM J		5.2 NAME			•	•	
STREET ADDRESS		•		TADDRESS				
CITY-ST-ZIP	PENSACOLA FL	□ sciere	5.4 CITY-5	T-ZIP				:x:
TITLE		☐ DELETE	6.1 TYTLE	'			☐ Change	☐ Addition
NAME	17.4		6.2 NAME					
STREET ADDRESS			CO OTDEE	TADODESS				
CITY-ST-ZIP			6.3 STREE	TADORESS				

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, or on an attachment with an address, with all other like empowered.

SIGNATURE:



**FILED** 

Feb 16, 1999 8:00am

**Secretary of State** 

02-16-1999 90057 032 \*\*\*150.00