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CORPORATION
ANNUAL REPORT
1995



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

-FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 18 AM 9:05

DOCUMENT # **H78228**

(4)

1. Corporation Name

LUCIAN KRAGIEL, BUILDER, INC.

Principal Place of Business

**1502 NW 6TH STREET
SUITE A
GAINESVILLE FL 32601**

Mailing Address

**1502 NW 6TH STREET
SUITE A
GAINESVILLE FL 32601
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/26/1985

3a. Date of Last Report
08/04/1994

4. FEI Number
59-2570673

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. 193.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KRAGIEL, LUCIAN
1502 NW 6TH STREET
GAINESVILLE FL 32601**

81 Name

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

83

84 City

FL

85

Zip Code

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, typed or printed name of registered agent, and title of agent (agent)

(If 11. Registered Agent signature required when recording)

(If 11. Registered Agent signature required when recording)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	VD
NAME	KRAGIEL, LUCIAN
STREET ADDRESS	3105 NW 38TH ST
CITY - ST - ZIP	GAINESVILLE FL
TITLE	PTD
NAME	REIFEL, ROBERT D.
STREET ADDRESS	3211 N.W. 58TH BLVD.
CITY - ST - ZIP	GAINESVILLE FL
TITLE	VD
NAME	KRAGIEL, GREGORY P.
STREET ADDRESS	1125 N.W. 36TH ROAD
CITY - ST - ZIP	GAINESVILLE FL
TITLE	SD
NAME	REIFEL, PATRICIA A.
STREET ADDRESS	3211 N.W. 58TH BLVD.
CITY - ST - ZIP	GAINESVILLE FL
TITLE	V
NAME	STEPHENS, THOMAS
STREET ADDRESS	RT. 1 BOX 1399R
CITY - ST - ZIP	MELROSE FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

14 NAME		☒ Change ☐ Addition
15 STREET ADDRESS		
16 CITY - ST - ZIP		32606
17 NAME		☒ Change ☐ Addition
18 STREET ADDRESS		
19 CITY - ST - ZIP		32606
20 NAME		☒ Change ☐ Addition
21 STREET ADDRESS		
22 CITY - ST - ZIP		32609
23 NAME		☒ Change ☐ Addition
24 STREET ADDRESS		
25 CITY - ST - ZIP		32606
26 NAME		☒ Change ☐ Addition
27 STREET ADDRESS		
28 CITY - ST - ZIP		32606
29 NAME		☐ Change ☐ Addition
30 STREET ADDRESS		
31 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions stated in Sections 193.032 and 193.033, 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 13, if changed, or on an attachment with an address.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LUCIAN KRAGIEL

1-12-95

904-378-0521