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 # H85759 BAREFOOT CONSTRUCTION COMPANY, INC.

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90099 001 ***150.00



Principal Place	of Business	Mailing Address			i - I shiiliin inin inin dirii ja da ann	# 1811 #1811 BII)II	6() #(8); #18;; ;ea;
2181 SE BOWIE PT ST LUCIE FL	-	2181 SE BOWIE ST PT ST LUCIE FL 34952 US	ST LUCIE FL 34952		DO NOT WRITE	E IN THIS	SPACE	
US US					3. Date Incorporated or Qualifed			
		,			11/15/1985			
2. Principal Pl	ace of Business	2a. Mailing Address		_ _	4. FEI Number		$\neg \neg$	Applied For
'	S S.w. Drift wood st	⊢	.12	Le boois	59-2616024			Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		10			\$8.7	5 Additional
	st. Lucie	27			5. Certifcate of Status Desired		Fee	Required
City & State City & State				-	6. Election Campaign Financing	П	\$5.0	0 May Be
23	FL.	28 Pt. St. Lucie_	FI	~·	Trust Fund Contribution	<u> </u>	Add	ed to Fees
Zip	Country	ZipC	ountry		8. This corporation owes the curre	nt year Inta		\. \
24 34	953 [25]	29 - 34953 30			Personal Property Tax.		☐ Yes	XNo
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	egistered A	igent	
			81	Name				-
WELTEN, DENNIS H.			82	Street Addre	ss (P.O. Box Number is Not Acceptal	ble)		
2181 SE BOWIE ST			L					
PORT	F ST. LUCIE FL 34952		83		-			{
			84	City			85 Z	Tip Code
						_ FL	1 -	·
office or re agent. I at	to the provisions of Sections 607.0502 agistered agent, or both, in the State or in familiar with, and accept the obligation Signature, typed or printed name of registered agent	f Florida. Such change was authoriz ons of, Section 607.0505, Florida St	ed by atutes	the corporation	n's poard of directors. Thereby accept	t the appoir	iment as	s registered
12.	OFFICERS AND		3.		ADDITIONS/CHANGES TO OFF	ICERS AN	D DIREC	CTORS IN 12
TITLE	PTD	☐ DELETE 1.1	TITLE				☐ Chan	ge 🗌 Addition
NAME	WELTEN, DENNIS H (CHAIR)	1.5	NAME					
STREET ADDRESS	2181 SE BOWIE ST	1,3	STREE	T ADDRESS				
CITY-ST-ZIP	II		CITY-S	ST-ZIP				
TITLE	S	☐ DELETE 2.11					☐ Chan	ge Addition
NAME			NAME					
STREET ADDRESS	1843 SW NORMAN LN	2.5	STREE	T ADDRESS	•		-	- \
CITY-ST-ZIP	PT ST LUCIE FL	2.	4 CITY-	ST-ZIP				
TITLE			TITLE				Chan	ge Addition
NAME		3.2	NAME					
STREET ADDRESS		i 3 <i>i</i>	STREE	T ADDRESS				.
CITY-ST-ZIP	l j	3,	LCITY-	ST-ZIP				
TITLE		☐ DELETE 4.1	TITLE				☐ Chan	ige
NAME		4.	2 NAME					
STREET ADDRESS		43	STREE	TADORESS				
CITY-ST-ZIP		14.	CITY-S	ST-ZIP				
TITLE			TITLE				☐ Chan	nge
NAME		5.3	NAME	1				
STREET ADDRESS		5.5	STREE	T ADDRESS				Į
CITY-ST-ZIP	~ .	5.	CITY-S	ST-ZIP				
TITLE	· · · · · · · · · · · · · · · · · · ·	DELETE 6.	TITLE				☐ Chan	nge
NAME		6.1	2 NAME					
STREET ADDRESS		6.	STREE	T ADDRESS				Į
CITY-ST-ZIP		6.	CITY-S	ST-ZIP]

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: