

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

FILED
Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90231 032 ***158.75

042360

DOCUMENT # J06113

1. Corporation Name

KOHLER CONSTRUCTION COMPANY, INC.

Principal Place of Business

6425 53RD ST. NO.
PINELLAS PARK FL 34665-5629

Mailing Address

6425 53RD ST. NO.
PINELLAS PARK FL 34665-5629

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/19/1986

4. FEI Number

59-2674229

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

27

Zip

Country

28

29

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME KOHLER, ALVIN W.
STREET ADDRESS 6425 53RD ST N
CITY-ST-ZIP PINELLAS PARK FL

TITLE ☐ DELETE

NAME KOHLER, JOSEPH W.
STREET ADDRESS 6425 53RD ST N
CITY-ST-ZIP PINELLAS PARK FL

TITLE ☐ DELETE

NAME PLEDGER, THOMAS R.
STREET ADDRESS 4440 PGA BLVD STE 600
CITY-ST-ZIP PALM BEACH GARDENS FL

TITLE ☒ DELETE

NAME FRAZIER, PATRICIA B.
STREET ADDRESS 4440 PGA BLVD STE 600
CITY-ST-ZIP PALM BEACH GARDENS FL

TITLE ☐ DELETE

NAME BETLACH, DOUGLAS J
STREET ADDRESS 4440 PGA BLVD STE 600
CITY-ST-ZIP PALM BEACH GARDENS FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

NAME Tiller, Marc R.
1.2 STREET ADDRESS 4440 PGA Blvd Ste 600
1.3 CITY-ST-ZIP Palm Beach Gardens FL 33410

2.1 TITLE ☐ Change ☒ Addition

NAME Nielsen, Steven E.
2.2 STREET ADDRESS 4440 PGA Blvd Ste 600
2.3 CITY-ST-ZIP Palm Beach Gardens FL 33410

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-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:

Alvin W. Kohler
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Alvin W. Kohler, Pres. 2/12/99 727-527-2077

Date

Daytime Phone #

CR2E034 (1/98)