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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J21856

(6)

G & G CONSTRUCTION OF NAPLES, INC.

FILED Apr 30 1997 8:00am Secretary of State

Principal Place % GARY E. JO 521 - 18TH AVI	HINSON E., N.W.	521 18TH AVE NAPLES FL 3	Mailing Address 521 18TH AVE NW NAPLES FL 34120-2356 US			3. Date Incorporated or Qualified 3a. Date of Last Report 10/11/1996			
NAPLES FL 341 US		US							
2. Principal P	lace of Business	2a. Mailing A	2a. Mailing Address			4. FEI Number	<u> </u>	Applied For	
21		26	26			59-2694152 Not Applicable			
Suite, Apt	#, etc.	Suite, Apt	Suite, Apt. #, etc.			SR 75 Additio			
22		27	27			5. Certificate of Status Desired	Fe Fe	e Required	
City & State	8	City & Sta	City & State			6. Election Campaign Financing	\$5	.00 May Be	
23	3		28			Trust Fund Contribution		ded to Fees	
Zip	Country	Zip	Zip Country			8. This corporation has liability for intangible tax under s. 199.03			
24	25	29	30				Yes 🗌 No		
	9. Name and Address of Cui	rrent Registered Age	<u>nt</u>			10. Name and Address of New Reg	istered Agent		
	NSON, GARY E.			81	Name				
	18TH AVE NW			82 Street Address (P.O. Box Number is Not Acceptable)					
NAP	LES FL 34120						ν,		
v v				83					
				84	City		Tag T	Zin Carla	
·					,			Zip Code	
11. Pursuant to	to the provisions of Sections 607.	0502 and 607 1508, Fi	lorida Statutos, t	he above	e-named co	rporation submits this statement for the partion's board of directors. I hereby accep	urpose of chang	ing its registered	
agent. I a	m familiar with, and accept the ot	oligations of, Section 6	07.0505, Florida	Statutes	i.	and to be and of embeloid, I hereby accept	тис арронино	it as registered	
SIGNATURE	A								
12,	Signature, typed or printed name of registeroc OFFICERS	AND DIRECTORS		gistered Age	ni signature rec	uired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE DO AND DIDEC	TORS IN 12	
TITLE	DP STREETS		DELETE	1.1 TITLE	1		Cha		
NAME	JOHNSON, GARY E.	L _	, otter	1.2 NAME			ال ال	ingo paradullon	
STREET ADDRESS	PALLANTIL AVEC ARM				ADODESC I	eriq Johnson		9	
CITY-ST-ZIP	NAPLES FL			1.3 STREFT	ADURESS L	erry Johnson 1822 Cortez Cir Vaples, FL		Į į	
TITLE	D		DELETE	1.4 CITY - S 2.1 TITLE	1-2119	rupics, + 2	Cha	nge Addition	
NAME	JOHNSON, GENE E.		, bittie	2.2 NAME			One	nige Rounion .	
STREET ADDRESS	4822 CORTEZ CIRCLE		- 1		4000000				
CITY-ST-ZIP	NAPLES FL		l	2.3 STREET	- 1				
TITLE	177.02010		DELETE	2.4 CITY - S 3.1 TITLE	11-714		Cha	inge Addition	
NAME				3.2 NAME	İ			mgc recontrol	
STREET ADDRESS			f	3.3 \$1REE1	ADDRESS				
CITY-ST-ZIP				3.4 CITY-5					
TITLE			DELETE	4.1 TITLE	01-CIF		Cha	nge Addition	
NAME				4. 2 NAME			L 0110	-94 - 71001001	
STREET ADDRESS			ŀ	4.3 STREET	ADDRESS				
CITY-ST-ZIP				4.4 CITY-S					
TITLE	***************************************		DELETE	5.1 TITLE	1 6 61		Cha	nge Addition	
NAME		_		5.2 NAME			hamal Silve		
STREET ADDRESS			I	5.3 STREET	ADDRESS				
CITY-ST-ZIP				5.4 CHY-S					
TITLE			DELF 1E	6.1 TILE	1-114.		☐ Cha	nge Addition	
NAME		_		6.2 NAME			L. One	ango EJ Addution	
STREET ADDRESS					ADDDE CO.				
ŀ				63 STREET					
CITY-ST-ZIP				64 CHY-S	1 - ZIP			,	

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.