

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # J53395 (6)

1. Corporation Name

C. H. GITTNER CONSTRUCTION, INC.



Principal Place of Business

411 DUNLAWTON AVENUE
PT ORANGE FL 32119

Mailing Address

411 DUNLAWTON AVENUE
PT ORANGE FL 32119

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

GITTNER, CRAIG H.
5 MARSH LANDING CT
PONCE INLET FL 32127

3. Date Incorporated or Qualified

01/23/1987

3a. Date of Last Report

03/21/1995

4. FLE Number

59-2765960

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. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81

Name

CHARLES H. GITTNER JR.

82

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

411 DUNLAWTON AVE.

83

84

City

PORT ORANGE

FL

85

Zip Code

32119

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

CHARLES H. GITTNER JR.

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature requires the following:

3-19-96

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

STD

GITTNER, CHARLES H., JR.
492 OAKLAND PARK BLVD.
PORT ORANGE FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

PD

GITTNER, CRAIG H.
5 MARSH LANDING CT
PONCE INLET FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

GITTNER, CHERYL L.
5 MARSH LANDING CT
PONCE INLET FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

13.

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

PD

GITTNER, CHARLES H. JR.
411 DUNLAWTON AVE
PORT ORANGE, FL. 32119

☒ Change

☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

STD

GITTNER, CRAIG H.
10 MARSH LANDING CT.
PONCE INLET, FL

☒ Change

☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

D

GITTNER, CHERYL L.
10 MARSH LANDING CT.
PONCE INLET, FL

☒ Change

☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change

☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change

☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change

☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHARLES H. GITTNER JR.

DATE

Daytime Phone #

3-19-96 904-761-9667

CR2E034 (12/95)