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

FILED **PROFIT** FLORIDA DEPARTMENT OF STATE Jan 21 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # J62535 (6)THIRD GENERATION CONSTRUCTION, INC. Mailing Address Principal Place of Business 600 SANDTREE DRIVE 600 SANDTREE DRIVE **SUITE #108** SUITE #108 PALM BEACH GARDENS FL 33403 DO NOT WRITE IN THIS SPACE PALM BEACH GARDENS FL 33403 3. Date Incorporated or Qualified 03/18/1987 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2788072 Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 23 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 30 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GRANTHAM, KIRK 1860 FOREST HILL BLVD. Street Address (P.O. Box Number is Not Acceptable) #105 83 W PALM BCH FL 33406 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Addition Change \_\_\_ DELETE 1.1 TITLE TITLE MADDOX, ROBERT D. 1.2 NAME NAME 7653 EDGEWATER DR. 1.3 STREET ADDRESS STREET ADDRESS W PALM BEACH FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition 2.1 TITLE TITLE MADDOX, SHIRLEY M. 2.2 NAME NAME 7653 EDGEWATER DR. STREET ADDRESS 2.3 STREET ADDRESS W PALM BEACH FL 2. 4 CITY-ST-ZIP CITY - ST - ZIP Addition DELETE Change TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADORESS 3.4, CITY-ST-ZIP CITY - ST - ZIF Change Addition DELETE TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP Addition Change DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP \_\_\_ Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 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 truttee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapatid, or on an attachment with an address.