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03-11-1999 90139 011 ***150.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **J79037**

1. Corporation Name

HALE CO	ONSTRUCTION, INC.							
Principal Place	e of Business	Mailing Address				I CONTROL DESCRIPTION DESCRIPTION TO THE PROPERTY OF STREET	, million (million) (f. 16.	Atali BiBli (BBI
80 ROYAL PALM BLVD. SUITE 404 VERO BEACH FL 32960 80 ROYAL PALM BLVD. SUITE 404 VERO BEACH FL 32960 VERO BEACH FL 32960						DO NOT WRITE IN THIS SPACE		
US US						3. Date Incorporated or Qualifed		
						06/19/1987		
2. Principal P	ace of Business	2a. Mailing Address				4. FEI Number	Ap	plied For
21		26				<u>59-2818544</u>		ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 / Fee Re			
City & Stat	e	City & State	City & State		6. Election Campaign Financing	\$5.00	May Be	
23		28			Trust Fund Contribution	Added	to Fees	
Zip	Country	Zip	Cour	ntry		8. This corporation owes the current year I		_ \
24		29	30			Personal Property Tax.	Yes	□No □
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Registere	d Agent	
	T IFFEDEV DAME			81	Name			ĺ
HALE, JEFFREY DAVIS 4050 11TH PLACE SW				82	Street Address (P.O. Box Number is Not Acceptable)			
VERO BEACH FL 32968				83		•		
				84	City	F	85 Zip (Code , , ; ;
								registered
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 age	ent and title if applicable (NOTE	Registered .	Agent	signature required	d when reinstating) DATE		
12.	OFFICERS At	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS		
TITLE	P	☐ DELETE 1.1 TI		LE			Change	☐ Addition
NAME	HALE, JEFFREY D.		1.2 NAME					
STREET ADDRESS	4050 11TH PLACE SW		1.3 STREE		ADDRESS			
CITY-ST-ZIP	VERO BEACH FL	· · ·	1.4 CITY-5		- ZIP			
TITLE	ST	☐ DELETE	2.1 TITLE				☐ Change	☐ Addition
NAME	HALE, TERRI A.		2.2 NAM			•		{
STREET ADDRESS	4050 11TH PLACE SW	2.3 \$		REET A	ADDRESS	1		
CITY-ST-ZIP	VERO BEACH FL		2. 4 CITY-		-ZIP	eter Vian	·-·	
TITLE		☐ DELETE	3.1 TITLE				☐ Change	☐ Addition
NAME			3.2 NA	ME				
STREET ADDRESS			3.3 ST	REET	ADDRESS			
CITY-ST-ZIP		——————————————————————————————————————	3,4. CI		-ZIP		Change	Addition
TITLE		☐ DELETE 4.11			1		□ Citatige	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREE					
CITY-ST-ZIP			4.4 CITY-S		-ZIP		Change	Addition
TITLE		☐ DELETE	5.1 TIT					□ Addition
NAME			5.2 NA		ADDDESS			
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP				Y-ST-	-ZIP		Change	Addition
TITLE		☐ DELETE	6.1 TIT				☐ Change	☐ Addition
NAME			6.2 NA					
STREET ADDRESS	•		■ 6.3 ST	KEET	ADDRESS	•		İ

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 of 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.

6.4 CITY-ST-ZIP

SIGNATURE

STREET ADDRESS