


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

FILED

Apr 30 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **J86707**

(3)

1. Corporation Name

J.D.H. CONSTRUCTION, INC.

Principal Place of Business

**5550 15TH ST. E.
BRADENTON FL 34203**

Mailing Address

**5550 15TH ST. E.
BRADENTON FL 34203-5952**



3. Date Incorporated or Qualified

08/12/1987

3a. Date of Last Report

05/01/1996

2. Principal Place of Business

21 1880 De Soto Rd.

Suite, Apt. #, etc.

2a. Mailing Address

26 1880 De Soto Rd.

Suite, Apt. #, etc.

City & State

23 Sarasota FL

City & State

28 Sarasota FL

Zip

24 34234

Country

25 SARASOTA

Zip

29 34234

Country

30 SARASOTA

4. FEI Number

59-2836353

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

9. Name and Address of Current Registered Agent

**TERENCE MATTHEWS
5190 26TH ST W SUITE D
BROD FL 34207**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **Bradenton**

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	PTD	<input type="checkbox"/> DELETE
NAME	HANEY, JAMES D.	
STREET ADDRESS	5550 15TH ST., E	
CITY - ST - ZIP	BRADENTON FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	HANEY, JOYCE M.	
STREET ADDRESS	5550 15TH ST., E	
CITY - ST - ZIP	BRADENTON FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	HANEY, MICHAEL D.	
STREET ADDRESS	5550 15TH ST., E	
CITY - ST - ZIP	BRADENTON FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	HANEY, DAYNA KIMBALL	
STREET ADDRESS	5550 15TH ST., E	
CITY - ST - ZIP	BRADENTON FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	MOSS, LARRY G.	
STREET ADDRESS	5550 15TH ST., E	
CITY - ST - ZIP	BRADENTON FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	HANEY, WILLIAM W.	
STREET ADDRESS	5550 15TH ST., E	
CITY - ST - ZIP	BRADENTON FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	1880 De Soto Rd
1.4 CITY - ST - ZIP	Sarasota FL 34234
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	1880 De Soto Rd.
2.4 CITY - ST - ZIP	Sarasota FL 34234
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	1880 De Soto Rd.
3.4 CITY - ST - ZIP	Sarasota FL 34234
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	1880 De Soto Rd.
4.4 CITY - ST - ZIP	Sarasota FL 34234
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	1880 De Soto Rd.
5.4 CITY - ST - ZIP	Sarasota FL 34234
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	1880 De Soto Rd.
6.4 CITY - ST - ZIP	Sarasota FL 34234

14. 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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES D. HANEY

Date

Daytime Phone #

0418793

CR2E034 (9/96)