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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J91529

(4)

HOLLY EARTHWORK, INC.

Mailing Address

123 LAKEVIEW ST MARY ESTER FL 32549 US

Principal Place of Business

123 LAKEVIEW ST. MARY ESTER FL 32569-2712 FILED Apr 21 1997 8:00am Secretary of State



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|----------------------------------|--|---------------------------------|------|---------------|-------------|--|--------------|----------------------------------|---------------------------|
| | | | | | | 3. Date Incorporated or Qualified 09/04/1987 | | te of Last Ri 4/1996 | eport |
| 2. Principal 21 423 | Place of Business LAKEVIEW 57 | 26. Mailing Address 26. YZ3 (A) | (EVI | EW | ST | 4. FEI Number 59-2845770 | | | plied For ot Applicabl |
| Suite, Api | t#, etc | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | | \$8.75 / Fee Re | |
| City & Sta | ale | City & State | | | | 6. Election Campaign Financing | | \$5.00 | May Be |
| 3 | | 28 | | | | Trust Fund Contribution | | Added 1 | |
| Zγρ "i | Country | Zip | | ountry | | 8. This corporation has liability for it | | | . 199.032, |
| <u> </u> | 25 | 29 | 30 | · | | Florida Statutes 10. Name and Address of New Red | | No | |
| 1441 | Name and Address of Cur LLIAMS, JAMES | rent Hegistered Agent | | 81 | Name | 10, Name and Address of New Re | Discolor \ | Gent | |
| | B LAKEVIEW ST | | | | | | | | |
| | RY ESTHER FL 32589 | | | 82 | Street Addr | ress (P.O. Box Number is Not Acceptab | le) | | |
| MA | INT ESTRICK PL 32309 | | | 83 | | | | | |
| | | | | | | | | | |
| | | | | 84 | City | | FL | 85 Zip (| Code |
| SIGNATURE | Stand in typed or printed have of registered | | | | | tion's board of directors. I hereby acceptions to the second of directors. I hereby acceptions to the second of th | DATE | | |
| 2. | The second secon | AND DIRECTORS | 13 | | | ADDITIONS/CHANGES TO OFFIC | | DIRECTOR | IS IN 12 |
| I f t f | PDC | DELETE | 1.5 | TITLE | | | | Change | Additi |
| AMt | WILLIAMS, JAMES | | 1.2 | NAME | | | | | |
| TBELLADORESS | | | 1.3 | STREET A | NDDRESS | | | | |
| ily St Zir | MARY ESTHER FL | | | CITY-ST | - ZIP | | | | |
| ILF | ST MILLIANC TEDECA | ☐ DELETE | | TITLE | | | | Change | Addit |
| AMÉ | WILLIAMS, TERESA 423 LAKEVIEW ST | | | NAME | | | | | |
| TREET ADDRESS | MARY ESTHER FL | | 1 | STREET A | | | | | |
| 11Y - ST - 2IP 11:F | MANI CONTENTS | DELETE | | CITY-ST | - ZIP | | | Change | Addit |
| .vvt | | | | NAME | | | | | |
| IREET AD(ASSS | ,] | | 3.3 | STREET A | ADDRESS . | | | | |
| TY - S1 - ZIP | | | 3.4. | CITY-ST | - ZIP | | | | |
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| THEET ACCEPTEDS | i | | | STREET A | | | | | |
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| ami Treli Aboress | | | | STREET A | innecce | | | | |
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| Htt | The second secon | DELETE | | TITLE | | | | Change | ☐ Addili |
| IAML | | | 6.2 | NAME | | | | | |
| TREET ADDRESS | . | | 6.3 | STREET A | DORESS | | | | |
| 217 - \$1 - 710 | | | 6.4 | CITY-ST | 71P | | | | |

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 comparation 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 phanged, or on an attachment with an address.

SIGNATURE:

AMILIA DATE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE

D

3R2E034 (9/96)