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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 04 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J97259

(2)

**ERRINGTON CONSTRUCTION, INC.** 

Ennino	TUN CONSTRUCTION, INC	•						
Principal Plac	e of Business	Mailing Address	Mailing Address			T TOBING BANK ARING KARAN DARK BANKA BANKA ARING A	TIOS OTOL OLOS CIOS	EIBII BIBII IBBI
2059 RANGE R CLEARWATER		2059 RANGE ROAD CLEARWATER FL 34625-2124						
						3. Date Incorporated or Qualified 10/14/1987	3a. Date of La 10/01/198	
2. Principa! F	Place of Business	2a. Mailing Address			4. FEI Number		Applied For	
21		26				59-2849935		Not Applicable
Suite, Apt.		Suite, Apt. #, etc.				5. Certificate of Status Desired		75 Additional se Required
City & Stat	le	City & State			Election Campaign Financing \$5.00 May Be			
<b>23</b> Ζιρ	Country	28	7	-4		Trust Fund Contribution	<del></del>	Ided to Fees
	Country	Zip	Cou	ntry		8. This corporation has liability for in	ntangible tax und	der s. 199.032,
24	25 g. Name and Address of Currer	1 Registered Agent	30			Florida Statutes  10. Name and Address of New Reg	Yes No	
EDÔ	INGTON, RONALD E	it Hogistered Agent		81 Nar	me .	10. Maille atto Address of New Maj	hararan waant	<del></del>
2059 RANGE ROAD CLEARWATER FL 34625				82 Stre	et Addre	ss (P.O. Box Number is Not Acceptab	le)	
VLE	ANWAIEN PL 34023		}	83			<del></del>	
				84 City	′		FL  85	Zip Code
11. Pursuant	to the provisions of Sections 607 050	2 and 607 1508. Florida Stati	ites the at	OVE-nam	ed corpo	ration submits this statement for the o	FL	ing its registered
office or r	registered agent, or both, in the State	of Florida, Such change was	authorized	by the	corporation	ration submits this statement for the points board of directors. I hereby accep	t the appointmen	nt as registered
	an rannar with, and accept the oblig-	anons or, section 607,0505, F	TOTICIA STATE	JIOS.				
SIGNATURE	Signature, typed or printed hance of registered age	nt and tile if applicable (NC	TE Registered	Agent sign	sture required	when reinstating)	DATE	
12.	OFFICERS AN	· · · · · · · · · · · · · · · · · · ·	13.			ADDITIONS/CHANGES TO OFFIC		TORS IN 12
TITLE	P	DELETE	1.1 117	LE			☐ Cha	
NAME	ERRINGTON, RONALD E		1.2 NA	ME		•		
STREET ADDRESS				1.3 STREET ADDRESS		·		
CITY - ST - ZIP	CLEARWATER BEACH FL 3463	30	1.4 CfT	Y~ST-21P				
TiTLE	ST DELETE		2.1 TIT	2.1 TITLE			☐ Cha	inge Addition
NAME	WITT, GLENN D		2.2 NA	2.2 NAME				
STREET ADDRESS	4221 EAGLE WATCH BLVD		2.3 ST	REET ADORE	ss			
CiTY-S1-ZIP	PALM HARBOR FL 34685		2. 4 CI	TY-ST-ZIP				
-mice		DELETE	3.1 TIT				☐ Cha	inge Addition
NAME			3.2 NA	ME				
STREET ADDRESS			3.3 ST	REET ADORE	ss			
CITY - ST - ZIP			3.4. CI	Y-ST-ZIP				
TITLE		☐ DELETE	4.1 TIT	re			Cha	inge Addition
NAME			4.2 N/	ME				i
STREET ADDRESS			4.3 STI	REET ADDRE	ss	•		!
CITY - ST - ZIP			4.4 CIT	Y-ST-ZIP				
TITLE		☐ DELETE	5 1 TIT	LE			Cha	inge 🔲 Addition
NAME			52 NA	ME	1			Į
STREET ADDRESS			5 3 STI	REET ADDRE	ss			
CITY-ST-7iP			5.4 CIT	Y-ST-ZIP				
THTLE		DELETE	6 1 TiT	.E			☐ Cha	inge 🔲 Addition
NAME			62 NA	ΜE				
STREET ADDRESS			6.3 ST	EET ADDRE	ss I			

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:

SIGNATURE:

SIGNATURE AND THER OR PRINTED NAME OF SIGNING DEFECTOR OF RECEIVED.

6.4 CITY-ST-ZIP