

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

55 MAY -1 PM 5:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # **K43353** (7)

1. Corporation Name

COUNTRY CLASSIC CONSTRUCTION COMPANY

Principal Place of Business

Mailing Address

**C/O RODNEY LEON ALWOOD
11302 SAND PINE RD.
RIVERVIEW FL 33569
US**

**11302 SANDPINE RD
RIVERVIEW FL 33569
US**

3. Date Incorporated or Qualified
11/04/1988

3a. Date of Last Report
05/01/1994

4. FEI Number
59-2925489

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. 196.037,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ALWOOD, RODNEY LEON
11302 SAND PINE RD
RIVERVIEW FL 33569**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0002 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 obligation set forth in Section 607.0005, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Registered Agent in Charge)

(Signature of Registered Agent or Registered Agent in Charge)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12.1 NAME	DP
12.2 NAME	DASHER, RONNIE EDWARD
12.3 STREET ADDRESS	11206 KILLEARN CT
12.4 CITY, ST, ZIP	RIVERVIEW FL
12.5 NAME	ST
12.6 NAME	ALWOOD, RODNEY LEON
12.7 STREET ADDRESS	11302 SANDPINE RD.
12.8 CITY, ST, ZIP	RIVERVIEW FL
12.9 NAME	
12.10 NAME	
12.11 STREET ADDRESS	
12.12 CITY, ST, ZIP	
12.13 NAME	
12.14 NAME	
12.15 STREET ADDRESS	
12.16 CITY, ST, ZIP	
12.17 NAME	
12.18 NAME	
12.19 STREET ADDRESS	
12.20 CITY, ST, ZIP	

13.1 NAME	☒ Change ☐ Addition
13.2 NAME	
13.3 STREET ADDRESS	P.O. Box 37
13.4 CITY, ST, ZIP	RIVERVIEW FL 33569
13.5 NAME	☐ Change ☐ Addition
13.6 NAME	
13.7 STREET ADDRESS	
13.8 CITY, ST, ZIP	
13.9 NAME	☐ Change ☐ Addition
13.10 NAME	
13.11 STREET ADDRESS	
13.12 CITY, ST, ZIP	
13.13 NAME	☐ Change ☐ Addition
13.14 NAME	
13.15 STREET ADDRESS	
13.16 CITY, ST, ZIP	
13.17 NAME	☐ Change ☐ Addition
13.18 NAME	
13.19 STREET ADDRESS	
13.20 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this report is voluntarily furnished and does not equally for the corporation stated in Section 119.07(2)(b), Florida Statutes. I further certify that the information is based on the corporation's best knowledge and belief and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or its authorized 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 of this report with an address.

SIGNATURE:

(Signature of Registered Agent or Registered Agent in Charge)

RODNEY ALWOOD

4/28/95

Date

Signature of Officer