

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

PROFIT  
CORPORATION  
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

19963-1-96

B-1714

C

DOCUMENT # **K56792** (0)

1. Corporation Name

**BLACKSHEAR AND SONS CONTRACT METALS, INC.**



Principal Place of Business

Mailing Address

% PEGGY J. BLACKSHEAR  
ROUTE 3, BOX 1688  
CALLAHAN FL 32011

% PEGGY J. BLACKSHEAR  
ROUTE 3, BOX 1688  
CALLAHAN FL 32011

3. Date Incorporated or Qualified

01/10/1989

3a. Date of Last Report

04/17/1995

4. FEI Number

59-2929025

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BLACKSHEAR, PEGGY J.  
RT. 3, BOX 1688  
CALLAHAN FL 32011

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 607.0502 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 date, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME  
D  
BLACKSHEAR, PEGGY J.  
STREET ADDRESS  
RT. 3, BOX 1688  
CITY - ST - ZIP  
CALLAHAN FL

TITLE ☐ DELETE

NAME  
D  
BLACKSHEAR, J. DAWSON  
STREET ADDRESS  
RT. 3, BOX 1688  
CITY - ST - ZIP  
CALLAHAN FL

TITLE ☐ DELETE

NAME  
D  
BLACKSHEAR, EDWARD N.  
STREET ADDRESS  
6162 DUCRAY FOREST DR  
CITY - ST - ZIP  
JACKSONVILLE FL

TITLE ☐ DELETE

NAME  
D  
BLACKSHEAR, LEE B.  
STREET ADDRESS  
RT. 3, BOX 1688  
CITY - ST - ZIP  
CALLAHAN FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

*J. Dawson Blackshear*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)