FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **K74852** **(0)**

1. Corporation Name
SEAGULL CONSTRUCTION MANAGEMENT, CORP.

Principal Place of Business
% PAUL SCHMERGEL JR
5255 BROOKVIEW DR
BOYNTON BCH FL 33437
US

Mailing Address
4160 WYCLIFFE CC BLVD
5255 BROOKVIEW DR
LAKE WORTH FL 33467
US

3. Date Incorporated or Qualified: 03/20/1989
3a. Date of Last Report: 02/09/1995

2. Principal Place of Business
21 11059 Indian Lake Cir.
22 Suite, Apt. #, etc.
23 City & State: Boynton Beach, FL 33437
24 Zip: 33437
25 Country: USA

2a. Mailing Address
26 11059 Indian Lake Cir.
27 Suite, Apt. #, etc.
28 City & State: Boynton Beach, FL 33437
29 Zip: 33437
30 Country: USA

4. FEI Number: 65-0125867 — 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**
SCHMERGERL, PAUL JR
4555 TURNBERRY CT
BOYNTON BCH FL 33436

10. **Name and Address of New Registered Agent**
81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 11059 Indian Lake Circle
83
84 City: Boynton Beach FL 85 Zip Code: 33437

11. Pursuant to the provisions of Sections 607.0502 and 607.0505, 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 of Registered Agent (Required if Agent is Changed) — Registered Agent Signature (Required if Agent is Changed) — DATE

12. OFFICERS AND DIRECTORS

TITLE: DP
NAME: SCHMERGEL, PAUL JR
STREET ADDRESS: 4555 TURNBERRY CT
CITY, ST, ZIP: BOYNTON BCH FL
☐ DELETE

TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP — ☐ DELETE

TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP — ☐ DELETE

TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP — ☐ DELETE

TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP — ☐ DELETE

TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP — ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE — ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS: 11059 Indian Lake Circle
1.4 CITY, ST, ZIP: Boynton Beach, FL 33437

2.1 TITLE — ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY, ST, ZIP

3.1 TITLE — ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP

4.1 TITLE — ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP

5.1 TITLE — ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP

6.1 TITLE — ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP

CR2E034 (12/95)

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: Paul Schmergel Jr. 1/31/96 407 364-0090
SIGNATURE AND TYPED OR PRINTED NAME OF MANING OFFICER OR DIRECTOR — Date — Daytime Phone #
Paul Schmergel Jr.