

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

FILED
Apr 23 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	--

DOCUMENT # **K85197**
1. Corporation Name
E C CONSTRUCTION, INC.

Principal Place of Business
90 ELINOR J. HOGAN
105 Island Circle
SARASOTA, FL. 34242

Mailing Address
-same-

2. Principal Place of Business 21 State Apt. # etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 05/03/1989	3a. Date of Last Report 4/24/96	4. FEI Number 65-0117138	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 HOGAN, ELINOR J. 105 Island Circle SARASOTA, FL. 34242	10. Name and Address of New Registered Agent 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 Type name, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating) DATE	
12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.1 TITLE ☐ DELETE NAME HOGAN, ELINOR J. STREET ADDRESS 105 Island Circle CITY-ST-ZIP SARASOTA, FL.	13.1 TITLE ☐ Change ☐ Addition 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY-ST-ZIP 13.5 TITLE ☐ Change ☐ Addition 13.6 NAME 13.7 STREET ADDRESS 13.8 CITY-ST-ZIP 13.9 TITLE ☐ Change ☐ Addition 13.10 NAME 13.11 STREET ADDRESS 13.12 CITY-ST-ZIP 13.13 TITLE ☐ Change ☐ Addition 13.14 NAME 13.15 STREET ADDRESS 13.16 CITY-ST-ZIP 13.17 TITLE ☐ Change ☐ Addition 13.18 NAME 13.19 STREET ADDRESS 13.20 CITY-ST-ZIP 13.21 TITLE ☐ Change ☐ Addition 13.22 NAME 13.23 STREET ADDRESS 13.24 CITY-ST-ZIP 13.25 TITLE ☐ Change ☐ Addition 13.26 NAME 13.27 STREET ADDRESS 13.28 CITY-ST-ZIP 13.29 TITLE ☐ Change ☐ Addition 13.30 NAME 13.31 STREET ADDRESS 13.32 CITY-ST-ZIP 13.33 TITLE ☐ Change ☐ Addition 13.34 NAME 13.35 STREET ADDRESS 13.36 CITY-ST-ZIP 13.37 TITLE ☐ Change ☐ Addition 13.38 NAME 13.39 STREET ADDRESS 13.40 CITY-ST-ZIP 13.41 TITLE ☐ Change ☐ Addition 13.42 NAME 13.43 STREET ADDRESS 13.44 CITY-ST-ZIP 13.45 TITLE ☐ Change ☐ Addition 13.46 NAME 13.47 STREET ADDRESS 13.48 CITY-ST-ZIP 13.49 TITLE ☐ Change ☐ Addition 13.50 NAME 13.51 STREET ADDRESS 13.52 CITY-ST-ZIP 13.53 TITLE ☐ Change ☐ Addition 13.54 NAME 13.55 STREET ADDRESS 13.56 CITY-ST-ZIP 13.57 TITLE ☐ Change ☐ Addition 13.58 NAME 13.59 STREET ADDRESS 13.60 CITY-ST-ZIP 13.61 TITLE ☐ Change ☐ Addition 13.62 NAME 13.63 STREET ADDRESS 13.64 CITY-ST-ZIP 13.65 TITLE ☐ Change ☐ Addition 13.66 NAME 13.67 STREET ADDRESS 13.68 CITY-ST-ZIP 13.69 TITLE ☐ Change ☐ Addition 13.70 NAME 13.71 STREET ADDRESS 13.72 CITY-ST-ZIP 13.73 TITLE ☐ Change ☐ Addition 13.74 NAME 13.75 STREET ADDRESS 13.76 CITY-ST-ZIP 13.77 TITLE ☐ Change ☐ Addition 13.78 NAME 13.79 STREET ADDRESS 13.80 CITY-ST-ZIP 13.81 TITLE ☐ Change ☐ Addition 13.82 NAME 13.83 STREET ADDRESS 13.84 CITY-ST-ZIP 13.85 TITLE ☐ Change ☐ Addition 13.86 NAME 13.87 STREET ADDRESS 13.88 CITY-ST-ZIP 13.89 TITLE ☐ Change ☐ Addition 13.90 NAME 13.91 STREET ADDRESS 13.92 CITY-ST-ZIP 13.93 TITLE ☐ Change ☐ Addition 13.94 NAME 13.95 STREET ADDRESS 13.96 CITY-ST-ZIP 13.97 TITLE ☐ Change ☐ Addition 13.98 NAME 13.99 STREET ADDRESS 13.100 CITY-ST-ZIP

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: **ELINOR J. HOGAN** *Elinor J. Hogan* 4/18/97 (941) 349-2129
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)