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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K95664

(4)

JIM MITCHELL CONSTRUCTION CO.

FILED Feb 07 1997 8:00am Secretary of State

Principal Place	on Rusinnes	Mailing Address		{ [8881811]	XIII 014H 010H 010H 010H 110H 110H 100H
% JAMES M. MITCHELL 545 26TH AVE N ST PETERSBURG FL 33704		% JAMES M. MITCHELL 545 26TH AVE N ST PETERSBURG FL 33704-26			
			the second	3. Date Incorporated or Qualified 06/14/1989	3a. Date of Last Report 04/04/1996
2. Principa: Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26	· · · · · · · · · · · · · · · · · · ·	59-2952823	Not Applicable
Suite Apt :	# etc:	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for it	ntangible tax under s. 199.032,
24	25	29 30	1		Yes No
9, Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
MITCHELL, JAMES M.			81 Name		
545 26TH AVE N			62 Street Addre	odress (P.O. Box Number is Not Acceptable)	
ST PETERSBURG FL 33704			Street Addin	Street Address (1.0. box Number is Not Acceptable)	
			63		
			84 City		FL 85 Zip Code
11. Pursuant to office or reagent. Lar	o the provisions of Sections 607 (egistered agent, or both, in the St n familiar with, and accept the ob	0502 and 607.1508, Florida Statutes, ate of Florida. Such change was aut bligations of, Section 607.0505, Florid	the above-named corp horized by the corporati la Statutes.	oration submits this statement for the pion's board of directors. I hereby accep	urpose of changing its registered t the appointment as registered
SIGNATURE:					
Signal LURE. Signales, typed or peaker raise of registered agent and tille 1 applicable OFFICERS AND DIRECTORS			egistered Agent signature require 13.	ed when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE
1/LE	PVT	DELETE DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFIC	Change Addition
	MITCHELL, JAMES M.	C Deterie			Change Addition
NAME	545-26 AVE NO		1.2 NAME		
STREET ADDRESS	ST. PETERSBURG FL		1.3 STREET ADDRESS		
City -St - 7:P	SI. PETENSBUNG PE	Decree	1 4 CITY - ST - ZIP		
TITLE		DELETE	2 1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			23 STREET ADDRESS		
CITY-S1-ZiP			2 4 City-St-ZiP		
1-TLE		☐ DELET E	3 1 TITLE		☐ Change ☐ Addition
NAME			32 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		

64 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 ham 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

3.4. CHTY-ST-ZIP

44 CITY-ST-ZIP

53 STREET ADDRESS

6.3 STREET ADDRESS

5 4 CITY - ST - ZIP

4.1 TITLE

4 2 NAME 43 STREET ADDRESS

51 TITLE

52 NAME

61 TITLE

62 NAME

DELETE

DELETE

DELETE

SIGNATURE:

CITY-ST-7IP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST 7IP

CITY-ST-7-P

CITY-ST-ZIP

TITLE

NAME

TITLE NAME

TITLE

NAME

Change

Change

Change

Addition

Addition

Addition