Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90003 044 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 107579

1. Corporation BRANHA	M CONSTRUCTION, INC.						
Principal Place	e of Business	Mailing Address		- I togican an asin tage and tage	`		
8007 RIDGE POINTE DRIVÉ W. LAKELAND FL 33810 US		8007 RIDGE POINTE DRIVE W. LAKELAND FL 33810 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
				08/04/1989			
	ace of Business Fairlane Drive	2a. Mailing Address 26 924 Fairlar	ne Drive	4. FEI Number 65-0133631	•	·	ied For Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	11 7	B.75 Ad Fee Req	l l
City & State 23 Lakeland, FL		City & State 28 Lakeland, FL		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			,
Zip Country Zip C			Country	This corporation owes the curr Personal Property Tax.	ent year Intangib	le ∕es χ[χNο
	9. Name and Address of Current	<u> </u>	<u> </u>	10. Name and Address of New F	tegistered Ager	ıt	
BRANHAM, WILLIAM P. 8007 RIDGE POINTE DRIVE W. LAKELAND FL 33810			82 Street Add	83			
			84 City	· ·	FL 85	Zip Co	ode
11. Pursuant office or ragent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation William P. Branh: Signature, typed or printed name of registered agent.	r Florida. Such change was autons of, Section 607.0505, Floridam, Director	the above-named cornorized by the corporate a Statistes, when the corporate a statistes are the corporate and the corporate are the corporate and the corporate are the corporate and the corporate are the corpor	P. Brank	purpose of chan pt the appointment 3/3/99	iii ga iogi	egistered stered
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OF	FICERS AND DI	RECTOR	
TITLE NAME STREET ADDRESS	D Branham, William P. 8007 RIDGE POINTE DRIVE W.	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS			Change	Addition
CITY-ST-ZIP	LAKELAND FL 33810		1.4 CITY-ST-ZIP				Addition
TITLE NAME		☐ DELETE	2.1 TITLE 2.2 NAME			Change	Addition
STREET ADDRESS			2.3 STREET ADDRESS			_	İ
CITY-ST-ZIP		T) DELETE	2. 4 CITY- ST- ZIP 3.1 TITLE		_ · <u></u>	Change	Addition
TITLE NAME		D) DECETE	3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CITY-ST-ZIP			<u> </u>	
TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME			4.2 NAME				}
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP		☐ DELETE	4.4 CITY-ST-ZIP			Change	Addition
TITLE		C) Defete	5.1 HILE 5.2 NAME		٠ .	14-90	
NAME STREET ADDRESS			5.3 STREET ADDRESS				}

14. I 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, with all other like empowered.

5,4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

SIGNING OFFICER OR DIRECTOR

DELETE

3/3/99

Change

☐ Addition

- 816-1414 Daytime Phone #