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

1996

DOCUMENT # L18608 (4) PINELLAS BAYSIDE CONSTRUCTION, INC.					
PINELL	AS BATSIDE CONSTRUC	HON, INC.		1 1 2 1 1 2 1 1 2 1 1 2 1 2 1 2 2 2 2 2	
Principal Place of Business		Mailing Address			kr nost andti miskis brokk sakali olibit ötöti 1881
% Donald E. Pierce 1245 48 Ave N St Petersburg Fl 33703		% Donald E. Pierce 1245 48 Ave N St Petersburg Fl 33703			
OT TETETION	300 TC 30700	SI FEIENSBUNG FL	33/03	3. Date Incorporated or Qualified	3a. Date of Last Report
- 5: : : : : :				09/25/1989	05/01/1995
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
Surte, Apt. #, etc.		Suite, Apt. #, etc.		59-2972962 Not Applicable	
22		27)		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Crty & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	***	Trust Fund Contribution	Added to Fees
Ζφ 24	Country	Zip	Country	8. This corporation has liability for	
24	9. Name and Address of Curr	29 ent Registered Agent	30		No No
		- Transition of Transition	81 Name	10. Name and Address of New I	negistered Agent
PIERCE,	DONALD E.		00	(DO) DO N	
1245 48 AVE N.			82 Street Add	dress (P.O. Box Number is Not Acceptal	Die)
ST PETE	RSBURG FL 33703		83		
			84 City		■■ 85 Zip Code
44 5			- "		
or registere	o the provisions of Sections 607.050 ed agent, or both, in the State of Fic	02 and 607.1508, Florida Statu Prida. Such change was authori	ites, the above named corporation's boa	oration submits this staterient for the pu ard of directors. I hereby accept the app	rpose of changing its registered office
familiar witi	h, and accept the obligations of Se	ction: 607.0505, Florida Statute	es.	то сер	Santhoni da registered agent. I ann
SIGNATURE _	Signature, by ed or printed name of registered ag-	of and the disconnection	li D't - Rogistered Ayont signaturu requir		[IATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	
TITLE	PD	☐ DELETE	1 1 THTLE		Change Addition
NAME	PIERCE, DONALD E.		1.2 NAME		
STREET ADDRESS	1245 48 AVE N		1.3 STREET ADDRESS		
CITY-ST-ZIP TIFLE	ST PETERSBURG FL STD	Fil Drutte	14 C-TY-ST-7-P		
NAME	SWOPE, JOHN M., III	☐ DELETE	2 1 TITLE		Change Addition
STREET ADDRESS	135 48 AVE N		2 2 NAME 2 3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3 1 TIFLE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CHTV - ST - ZIP		
TITLE		DETELE	4 1 THILE		Change Addition
NAME STREET ADDRESS			4 2 NAME		
E-TY-ST-ZiP			4.3 STREET ADDRESS		
TITLE		DELETE	4 4 CHTY-ST-7IP 5 1 TITLE		Change Addition
NAME			5 2 NAME		C Supplies C Monthell
STREET ADDRESS			5 3 STREET ADDRESS		
CITY - ST - ZIP			5 4 CITY - ST-ZIP		
TITLE		☐ DELETE	6 1 TITLE		Change Addition
NAME			6 2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
14 Ldo hereby	cedify that the information supplied	with the filma is volunted it is	64 CITY - ST - ZIP	for the exemption stated in Section 119.	0723447 57333 0
טוארים עיוגריסיט	DIE INIONTIALION INCIGATED ON THIS AND	ital record or suppliemental and	nual renortus trub and accurr	for the exemption stated in Section 119 atte and that my signature shall have the is report as required by Onapter 607, Fi	Appropriate the second of the

NED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE:

3-20-96 8/3-506-3219