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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L20421

(8)

E.T.L. CONSTRUCTION CO.

FILED
Apr 28 1997 8:00am
Secretary of State



Principal Plac	e of Business	Mailing Addre	888				-{	i mimil mimil m		
C/O LINDA A. LEWIS C/O LINDA										
2280 BRUNER LANE SE 2280 BRUNER LANE SE										
FORT MYERS FL 33912 FORT MYERS FL 33912-16							3. Date Incorporated or Qualified 3a. Date of Last F 10/02/1989 06/10/1996			
·	Place of Business	2a. Mailing Ad	ddress				4. FEI Number	A		Applied For
21		26					65-0154085			Not Applicabl
Suite, Apt	#, etc	Suite, Apt	, #, etc.				6. Certificate of Status Desired			Additional Required
City & Stat	te	27 City & Sta	ite				6. Election Campaign Financing			May Be
23		28					Trust Fund Contribution			d to Fees
Zip	Country	Zip		Count	ry		8. This corporation has liability for			
24	25	29		30				Yes [
	9. Name and Address of Cu	rrent Registered Ager	nt				10. Name and Address of New R	egistered	Agent	
LEW	/IS, LINDA A.			8	1 Na	me				
	BRUNER LANE SE			8:	2 St	eet Addre	ess (P.O. Box Number is Not Accepta	ble)	******	
FOR	RT MYERS FL 33912						() = -			
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				8	4 Ci	v			85 Zi	p Code
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omee or	reg stered agent of both, in the c	state of Florida Cooting	OZ NEDE EIN	alala Diakini						
office or agent 1 a SIGNATURE	to the provisions of Sections 607 registered agent or both, in the Sam familiar with, and accept the construction of register.						ed when reinstating)	DATE		
	Signature, typed or punted name of registors							DATE		
SIGNATURE	Signature, typed or pented name of registers OFFICERS	agent and title if applicable		: Registered A	genl sig		ed when reinstating)	DATE		ORS IN 12
SIGNATURE	Signature, typical or printed name of registers OFFICERS VD LEWIS, TED JR.	agent and title if applicable	(NOTE	Registered A	gent sig		ed when reinstating)	DATE	DIRECT	ORS IN 12
SIGNATURE 12. Inte	Signature, typical or protect name of registers OFFICERS VD LEWIS, TED JR. 2280 BRUNER LANE SE	agent and title if applicable	(NOTE	Hegistered A	gent sig	nature require	ed when reinstating)	DATE	DIRECT	ORS IN 12
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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 of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; the Lam an officer or director of the corporation or the receiver or tristee 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNAL

E OF SIGNING OFFICER OF DIRECTOR

911-401-7