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

PROFIT CORPORATION ANNUAL REPORT

1997

LAKELAND FL 33813



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L35939

(2)

JOHN R. BUDD CONSTRUCTION COMPANY

Principal Place of Business Mailing Address 2135 BRANDYWINE CT 2135 BRANDYWINE CT LAKELAND FL 33813-3702

FILED Feb 25 1997 8:00am Secretary of State



Uõ			UU			L.,		
						3. Date Incorporated or Qualified 12/13/1989 3a. Date of Last Report 04/05/1996		
Principal F. دومندمند			2a. Mailing Address	1. 2	* 751	4. FEI Number		Applied For
21 55/5	- EME	rald ridge in	186 2212 GMBR	ald k	SIDGE TELVA	59-2993753		Not Applicable
Suite, Apt			Suite, Apt #, etc.		•	5. Certificate of Status Desired		.75 Additional ee Required
City & State City & State City & State City & State City & State					E/	Election Campaign Financing Trust Fund Contribution		.00 May Be ided to Fees
Zip		Country	Z(p)		untry	8. This corporation has liability for i		
24 338	と	25 U.S.A.	m-v	30	U.S.A.	Florida Statutes	Yes No	DBI S. 199.032,
		and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Agent	
	HTTON, CH				81 Name			
5300 S. FLORIDA AVENUE 82 Street Addres						ss (P.O. Box Number is Not Acceptab	ıle)	
LAKELAND FL								
					83			
					84 City	***************************************	85	Zip Code
							FL	
 Pursuant office or r 	to the provis registered ac	oris of Sections 607.0502 jent, or both, in the State (! and 607.1508, Florida Stat of Florida. Such chance wa:	utes, the a s authorize	above-named corporation	pration submits this statement for the pon's board of directors. I hereby accer	surpose of chango	ing its registered
agent La	m familiar w	ith, and accept the obliga	tions of, Section 607.0505,	Florida Sta	atutes.	on's board of directors. I hereby accep	- sio appointing	ao rogistorou
SIGNATURE	Strengt and Report	For printed harrie of registered ages	and the dependency (N	OTF Pagister	ed Agent signature required	A when rejectstan	DATE	
12.		OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC		CTORS IN 12
TITLE	DPT		DELETE		ITLE	7.007,107,07,07,07,000,100,100	☐ Chi	
NAME	BUDD, JO	ohn R.	· · · · · · · · · · · · · · · · · · ·		NAME			ingo Lii raamon
STREET ADDRESS	2135 BR/	ANDYWINE CT			STREET ADDRESS			
Crity - ST - ZiP	LAKELAN	D FL			CITY-ST-ZIP			
TITLE	VP		☐ DELETE		OTLE		Cha	ange Addition
NAME	BUDD, PI	HYLLIS A.		2.21	NAME			,
STREET ADDRESS	2135 BR/	INDYWINE CT			STREET ADDRESS	<i></i>		
DiTY - ST - ZIP	LAKELAN	D FL			CITY-ST-ZIP			
TITLE			☐ DELETE	3.1 1			Cha	ange Addition
NAME				3.2	NAME			-
STREET ADDRESS				3.3 9	STREET ADDRESS			
City - S) - ZIP				3	CITY-ST-ZIP			
TITLE			DELETE	4.11	*************		Cha	ange Addition
NAME:				4.2	NAME			
STREET ADDRESS				4.3 5	STREET ADDRESS			
City-St-7IP					CITY-ST-ZIP			
TILLE			DELETE	517			☐ Cha	ange Addition
NAME				5.2				
STREET ADDRESS					STREET ADDRESS			
CHY-ST-ZIP					CITY-ST-ZIP			
TITLE	,		DELETE	617			Cha	ange Addition
NAME					IAME			hand standard
STREET ADDRESS					STREET ADDRESS			
CITY - ST - ZIP					CITY-ST-ZIP			
	·			U.4 C	W. 1 O 1 - Z II]			

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 eath; that I am an officer or director of the corporation or the feceiver 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 or in attachment with an address.

SIGNATURE:

2-17-97

941-644-1493