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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L49574

(1)

SOULE CONSTRUCTION COMPANY, INC.

FILED Feb 05 1998 8:00am Secretary of State

Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Status Desired \$8.75 Add Fee Requence Fee Requenc	oplicable tional red y Be ses ible o
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Soute, Apt. #, etc.	tional red y Be ses ible o
27 City & State	red y Be ses ible o
28 Trust Fond Contribution Added to F Zip Country Zip Country B. This corporation owes or has pald the current year Intent 24 25 29 30 To Personal Property Tax due June 30. Yes Personal Property Tax due June 30. Y	ees ible o
Zip	ible o
SOULE, JOHN F. 1313 NORTH PACE BOULEVARD PENSACOLA FL 32505 82 Street Address (P.O. Box Number is Not Acceptable) PENSACOLA FL 32505 83 64 City FL 85 Zip Cod 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutos, the above-named corporation submits this statement for the purpose of changing its re office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as rec agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutos. SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II 11. ITILE OFFICERS AND DIRECTORS II 12. NAME SOULE, MARY 0. STREET ADDRESS CITY-ST-ZIP PENSACOLA FL OFLICE Change Chang	0
SOULE, JOHN F. 1313 NORTH PACE BOULEVARD PENSACOLA FL 32505 82 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its recoffice or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as regarded. I am familier with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title dispriscable. OFFICERS AND DIRECTORS 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing list recommendations agent and state of Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title dispriscable. (NOTF: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS I 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II TITLE SOULE, MARY 0. 12 NAME SOULE, MARY 0. 12 NAME 13 STREET ADDRESS CITY-ST-ZIP PENSACOLA FL 14 CITY-ST-ZIP TITLE DELETE 14 CITY-ST-ZIP Change Chang	
1313 NORTH PACE BOULEVARD PENSACOLA FL 32505 82 Street Address (P.O. Box Number is Not Acceptable) 83	
PENSACOLA FL 32505 83 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutos, the above-named corporation submits this statement for the purpose of changing its recording or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as regarded. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE Signature, typed or printed name of registered agent and title d application. (NOTF: Registered Agent signature required when reinstaing) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II 11/1LE D DELETE 1.1 ITLE Change Change TITLE D Change TITLE D Change C	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutos, the above-named corporation submits this statement for the purpose of changing its reduced or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as regarded and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or prifted name of registered agent and title diapplicable. (NOTE Registered Agent signature required when reinstaing) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS III. NAME SOULE, MARY O. 12. NAME SOULE, MARY O. 12. NAME SOULE, MARY O. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS III. Change III. Change III. Change III. AMME SOULE, JOHN F. 22. NAME SOULE, JOHN F. 22. NAME STREET ADDRESS	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its recoffice or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as recagent. I am familier with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS INTILE OFFICERS AND DIRECTORS 11. Inter SOULE, MARY O. 12. NAME STREET ADDRESS CITY-ST-ZIP PENSACOLA FL OFLICE OFFICERS AND DIRECTORS 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP Change	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its recoffice or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as recagent. I am familier with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS INTILE OFFICERS AND DIRECTORS 11. Inter SOULE, MARY O. 12. NAME STREET ADDRESS CITY-ST-ZIP PENSACOLA FL OFLICE OFFICERS AND DIRECTORS 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP Change	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its report of office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as regardent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS III. NAME SOULE, MARY O. 12. NAME SOULE, MARY O. 13. STREET ADDRESS CITY-ST-ZIP PENSACOLA FL 14. CITY-ST-ZIP DELETE 14. CITY-ST-ZIP DELETE 22. NAME SOULE, JOHN F. 22. NAME SOULE, JOHN F. 23. STREET ADDRESS TENER ADDRESS TENER ADDRESS TENER ADDRESS TENER ADDRESS THE TADDRESS THE	gistered stered
DELETE	
NAME SOULE, MARY O. 1.2 NAME 206 CARTWRIGHT AVE 1.3 STREET ADDRESS CITY-ST-ZIP PENSACOLA FL 1.4 CITY-ST-ZIP Change C	
STREET ADDRESS 206 CARTWRIGHT AVE PENSACOLA FL 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 1.1 TITLE D DELETE 2.1 TITLE SOULE, JOHN F. 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2.3 STREET ADDRESS 2.3 STREET ADDRESS 2.3 STREET ADDRESS 2.4 STREET ADDRESS 2.5 STREE	Addition
CITY-ST-ZIP PENSACOLA FL 1.4 CITY-ST-ZIP TITLE D DELETE 2.1 TITLE SOULE, JOHN F. 2.2 NAME STREET ADDRESS PENSACOLA FL 2.3 STREET ADDRESS PENSACOLA FL	<u> </u>
TITLE D DELETE 2.1 TITLE Change C NAME SOULE, JOHN F. 2.2 NAME STREET ADDRESS 435 CREARY STREET 2.3 STREET ADDRESS PENIA COLA FILE DELETE 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.3 STR	
NAME SOULE, JOHN F. STREET ADDRESS 435 CREARY STREET 2.2 NAME 2.3 STREET ADDRESS 2.3 STREET ADDRESS	Addition
STREET ADDRESS 435 CREARY STREET 2.3 STREET ADDRESS	1 Mauricon
DENIGACOLA EL	[
	Addition
NAME 3.2 NAME	
STREET ADDRESS	1
CITY-ST-ZIP 3.4. CITY-ST-ZIP	
	Addition
NAME 4.2 NAME	1
STREET ADDRESS 4.3 STREET ADDRESS	İ
CITY-ST-ZIP 4.4 CITY-ST-ZIP	
TITLE DELETE 5.1 TITLE Change	Addition
NAME 52 NAME	
STREET ADDRESS 5.3 STREET ADDRESS	-
CITY-ST-ZIP 54 CITY-ST-ZIP	
	Addition
NAME	
STREET ADDRESS 6.3 STREET ADDRESS	
City-St-ZiP 6.4 City-S1-ZiP 6.5 City-S1-ZiP 6.	anatic =

4. Thereby certify that the information supplied with this tiling 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 supplied enter 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 such a region or trusted in present this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an interpret with an address.

CICNIATURE.

1/29/98