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

SIGNATURE:

Jul 29 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE Secretary of State CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # L50950 (9) CARYL ANNE JEWELL BUILDERS, INC. Principal Place of Business Mailing Address 2165 MATHISON ROAD 2165 MATHISON ROAD **CANTONMENT FL 32533** CANTONMENT FL 32533 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/14/1990 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 5733 Wdu uld Court 5733 12 59-3008813 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 32583 Fee Required Multon multo 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Count 8. This corporation owes or has paid the current year Intangible 325B3 Santa 205 2 20 Personal Property Tax due June 30. Yes 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WELLS, V. KEITH 125 WEST ROMANA STREET 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 608 PENSACOLA FL 32501 83 84 City Zip Code 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 registered 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 registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE DATE Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change Addition DLLETE TITLE 1.1 TITLE JEWELL, CARYL ANNE NAME 1.2 NAME CR2E034 2165 MATHISON ROAD STREET ADDRESS 1.3 STREET ADDRESS CANTONMENT FL CITY-ST-ZIP 1.4 CITY - ST - ZIP ☐ Addition DELETE 2.1 TITLE THILE JEWELL, DAVID F. NAME 2.2 NAME 2165 MATHISON ROAD 2 3 STHEET ADDRESS STREET ADDRESS **CANTONMENT FL** 2. 4 CITY - ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE JEWELL, DAVID F. NAME 3.2 NAME 2165 MATHISON ROAD STREET ADDRESS 3.3 STREET ADDRESS CANTONMENT FL CITY-ST-ZIP 3.4. CHY- ST- ZIP DELETE Addition TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - 7IP CITY-ST-ZIP DELETE Channe Addition TITLE 5.1 HILE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 City-St-ZiE CITY - ST-ZIP 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 Statules, 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 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.

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