

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L56770** (5)
1. Corporation Name
FLORIDA CONSTRUCTION AND LAND DEVELOPMENT, INC.

FILED
1995 JUL 20 AM 10:18
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
% ALAN F. CONVEY
1093 A1A BEACH BLVD., STE. 205
ST AUGUSTINE BEACH FL 32084
US

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21 Suite, Apt. #, etc.	25 Suite, Apt. #, etc.	03/09/1990	06/09/1994
22 City & State	27 City & State	4. FBI Number	Applied For
23 Zip	28 Zip	59-3014329	Not Applicable
24 Country	29 Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	30	☐ Yes ☐ No	\$5.00 May Be Added to Fees
		6. Election Campaign Financing Trust Fund Contribution ☐	
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CONVEY, ALAN F.
1093 A1A BEACH BLVD.
STE. 305
ST AUGUSTINE FL 32084

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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

[Signature]

ALAN F. CONVEY PRESIDENT

DATE

7/1/95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	CONVEY, ALAN F.	1.2 NAME	
STREET ADDRESS	9425 OLD AIA	1.3 STREET ADDRESS	
CITY - ST - ZIP	ST. AUGUSTINE FL	1.4 CITY - ST - ZIP	
TITLE	VD	2.1 TITLE	☐ Change ☐ Addition
NAME	MARTIN, KEITH	2.2 NAME	
STREET ADDRESS	1056 ALCALA DR.	2.3 STREET ADDRESS	
CITY - ST - ZIP	ST. AUGUSTINE FL	2.4 CITY - ST - ZIP	
TITLE	STD	3.1 TITLE	☐ Change ☐ Addition
NAME	CONVEY, PATRICIA L.	3.2 NAME	
STREET ADDRESS	9425 OLD AIA	3.3 STREET ADDRESS	
CITY - ST - ZIP	ST. AUGUSTINE FL	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 oath, 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, unchanged, or on an attachment with an address.

SIGNATURE:

[Signature]
ALAN F. CONVEY

7/1/95

904-471-1123

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Anytime After 8)

CR2E034 (3/95)