

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Candice B. Murdair  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

55 MAY - 1 11 136

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **L69147** (1)

1. Corporation Name  
**S & A CONSTRUCTION & MANAGEMENT CORP.**

Principal Name & Mailing Address  
**% RONALD E. ANTILL  
208 US HWY 1 #2  
TEQUESTA FL 33469**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>04/27/1990</b>	3a. Date of Last Report <b>04/15/1994</b>
4. FEI Number <b>65-0193795</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
7. This corporation has liability for intangible tax under S. 199.032 Florida Statutes. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Name of Director	2a. Mailing Address
21. State, Apt. # etc.	26. State, Apt. # etc.
22. City & State	27. City & State
23. ZIP	28. ZIP
24. Country	29. Country
25. Country	30. Country

**9. Name and Address of Current Registered Agent**

**ANTILL, RONALD E.  
208 US HWY 1  
SUITE 2  
TEQUESTA FL 33469**

**10. Name and Address of New Registered Agent**

81. Name	85. Zip Code
82. Street Address (if O. Box Number is Not Acceptable)	<b>FL</b>
83.	
84. City	

11. Pursuant to the provisions of Sections 607.01(2) and 607.01(3)(b), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent in Florida. The Florida Department of State was notified and the corporation's board of directors, if any, accepted the appointment as registered agent, if any, and accepted the resignation of the former registered office, if any.

SIGNATURE: \_\_\_\_\_ Title: \_\_\_\_\_

**12. OFFICERS AND DIRECTORS**

12a. NAME	12b. STREET ADDRESS	12c. CITY, ST, ZIP
1. PD <b>SOVINSKI, RONALD A.</b>	<b>220 OSCEOLA WAY PALM BEACH FL</b>	
2. STD <b>ANTILL, RONALD E.</b>	<b>44 BALFOUR RD E PALM BEACH GDNS FL</b>	
3. NAME	3. STREET ADDRESS	3. CITY, ST, ZIP
4. NAME	4. STREET ADDRESS	4. CITY, ST, ZIP
5. NAME	5. STREET ADDRESS	5. CITY, ST, ZIP
6. NAME	6. STREET ADDRESS	6. CITY, ST, ZIP

**13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12**

13a. NAME	13b. STREET ADDRESS	13c. CITY, ST, ZIP	Change <input checked="" type="checkbox"/> Add <input type="checkbox"/>
1. NAME	<b>255 Plantation Rd.</b>	<b>33480</b>	
2. NAME			Change <input type="checkbox"/> Add <input checked="" type="checkbox"/>
3. NAME			Change <input type="checkbox"/> Add <input type="checkbox"/>
4. NAME			Change <input type="checkbox"/> Add <input type="checkbox"/>
5. NAME			Change <input type="checkbox"/> Add <input type="checkbox"/>
6. NAME			Change <input type="checkbox"/> Add <input type="checkbox"/>

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.03(2)(b), Florida Statutes. I further certify that the officers, directors indicated on this annual report or supplemental annual report are 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 at the time of my appointment or my withdrawal from office as provided by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of this report or on any attachment with my address.

SIGNATURE: **Ronald E. Antill**  
 Title: **Soc'y/Trea.**  
 Date: **04/27/95**  
 Phone: **407-743-8494**