	NOW: FILING FEE	AFTER MAY 1	S \$225.00	7	
CORF	PROFIT PORATION		RTMENT OF STATE B. Mortham		
	AL REPORT		ary of State		
	19963-2796	B-2018010F	CORPORATIONS C		
DOCUN 1. Corporation		78 (6)			
JIM A	LEXANDER CONSTRUCTI	ON, INC.		1 18 0 11 6 4 6 0 0 1 6 5 1 0 0 1 1 0 1 1 0 1 1 0 1 1 0 1 1 0 1 1 0 1 1 0 1 1 0 1 1 0 1 1 0 1 1 0 1 1 0 1 1 0 1	ISBN ARMA BURNI BURNI BIBNI BURNI BURNI BURNI BURNI BURNI
Principal Place	of Business	Mailing Address			
10836 SE 72TH TERR BELLEVIEW FL 34420 US		P.O. BOX 2229 BELLEVIEW FL 34421 US	ı		
				3. Date Incorporated or Qualified 07/12/1990	3a. Date of Last Report 03/31/1995
2. Principal Place of Business		2a. Mailing Address		4, FEI Number 59-3020817	Applied For Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.	, , , , , , , , , , , , , , , , ,	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip ?4	Country 25	Ζφ 29	Country 30	This corporation has liability for Florida Statutes	intangible tax under s 199.032,
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New F	legistered Agent
10836	NDER, JAMES R. SE 72 TERR VIEW FL 34420		82 Street Add	ress (P.O. Box Number is Not Acceptat	ole)
			84 City		FL 85 Zip Code
11. Pursuant to	the provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the above-named corpo	ration submits this statement for the pur and of directors. Thereby accept the app	roose of changing its registered office
familiar with	i, and accept the obligations of, Sec	tion 607.0505, Florida Statutes.	a by the corporation's pos	по от апестогу т петеру ассерт те арр	omunent as registered agent, i am
SIGNATURE	Egnature, typed or printed name of registered agen	t and little if anniholable (NOT)	è: Begistereo Agent signature require	and which record a right	DATE
12.		ID DIRECTORS	13.	ADDITIONS/CHANGE'S TO OFF	· — · · · · · · · · · · · · · · · · · ·
TITLE	DPT	☐ DELETE	1. 1 TITLE		☐ Change ☐ Addition ☐
NAME	ALEXANDER, JAMES R		1.2 NAME		8
STREET ADDRESS	10836 SE 72 TERR		1.3 STREET ADDRESS		
CITY-S1-ZIP	BELLEVIEW FL 34420		1.4 CHIY-SI-ZIP		Change
TITLE	\$	☐ DELETE	2 1 TITLE		Change Addition
NAME	ALEXANDER, JAMES R		2 2 NAME		
STREET ADDRESS	10836 SE 72 TERR		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	BELLEVIEW FL 34420 DVP	DELETE	2.4 CITY - ST- 7IP		Chagas Addition
NAME	ALEXANDER, DIANE E	C pectic	3 1 TITLE 32 NAME		☐ Change ☐ Addition
STREET ADDRESS	10836 SE 72 TERR		3.3. STREET ADDRESS		
CHTY-ST-ZIP	BELLEVIEW FL 34420		3.4 CITY- \$1-ZIP		
TITLE	DECENTED TE OTTEO	DELETE	4. 1 TITLE		Change Addition
NAME		L.3	4.2 NAME		
STREET ADDRESS			43 STREET ADDRESS		•
CITY - \$1 - ZIP			4.4 CHTY - ST - ZIP		
TITLE		☐ DELETE	5 1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-7IP		
TiTLE		☐ DELETE	6 1 TITLE		Change Addition
NAME			6.2 NAME		1
STREET ADDRESS			6 3 STREET ADDRESS		.
			•		i

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 cath; 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.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daylone Prant I

3/22/96 352-245-1574