

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

FILED
Jul 17 1998 8:00am
Secretary of State

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| PROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS |
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DOCUMENT # **L93365** (9)
1. Corporation Name
C & K CONSTRUCTION, INC.



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| Principal Place of Business % JAMES M. COOPER 8617 CAREY RD LITHIA FL 33547 | Mailing Address % JAMES M. COOPER 8617 CAREY RD LITHIA FL 33547 |
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DO NOT WRITE IN THIS SPACE

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| 2. Principal Place of Business 21 333 Falkenburg Rd. North Suite, Apt. #, etc. 22 City & State 23 Tampa, Florida Zip Country 24 33619 25 Hillsborough | | 2a. Mailing Address 26 333 Falkenburg Rd. North Suite, Apt. #, etc. 27 City & State 28 Tampa, Florida Zip Country 29 33619 30 Hillsborough | | 3. Date Incorporated or Qualified 08/13/1990 | 4. FEI Number 59-3020513 Applied For Not Applicable | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees | 6. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
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| 9. Name and Address of Current Registered Agent COOPER, JAMES M. 8617 CAREY RD LITHIA FL 33547 | | 10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL | |
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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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE James M. Cooper James M. Cooper **06-29-98**
Signature, typed or printed name of registered agent, use if applicable (Name must be typed or printed in full when reinstating)

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| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Officer President COOPER, JAMES M. 8617 CAREY RD LITHIA FL | 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP | Daniel E. Cooper President 333 Falkenburg Rd. North Tampa, FL 33619 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D KEY, DAVID A. 2001 PEARSON RD VALRICO FL | 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 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 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 if changed, or on an attached sheet with an address.

SIGNATURE James M. Cooper James M. Cooper **06-29-98** **013 1911-1937**

CR2E034 (10/97)