

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

FILED
Jul 17 1998 8:00am
Secretary of State

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.



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

3. Date Incorporated or Qualified
08/13/1990

2. Principal Place of Business 21 333 Falkenburg Rd. North Suite, Apt. #, etc. 22 Tampa, Florida City & State 23 Tampa, Florida City & State Zip Country 24 33619 25 Hillsborough 28 33619 30 Hillsborough	2a. Mailing Address 26 333 Falkenburg Rd. North Suite, Apt. #, etc. 27 Tampa, Florida City & State Zip Country 28 Tampa, Florida City & State Zip Country 29 33619 30 Hillsborough
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4. FEI Number
59-3020513

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

6. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

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 **FL** 85 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 James M. Cooper James M. Cooper **06-29-98**

12. OFFICERS AND DIRECTORS

TITLE Exec President	<input type="checkbox"/> DELETE
NAME COOPER, JAMES M.	
STREET ADDRESS 8617 CAREY RD	
CITY-ST-ZIP LITHIA FL	
TITLE D	<input checked="" type="checkbox"/> DELETE
NAME KEY, DAVID A.	
STREET ADDRESS 2001 PEARSON RD	
CITY-ST-ZIP VALRICO FL	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Daniel E. Cooper	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME President	
1.3 STREET ADDRESS 333 Falkenburg Rd. North	
1.4 CITY-ST-ZIP Tampa, FL. 33619	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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*****150.00**

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 through an address.

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

CR2E034 (10/97)