

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **M69009** (2)

1. Corporation Name

TREVATHAN CONSTRUCTION COMPANY, INC.



Principal Place of Business

**6817 HUGH DRIVE
CALLAWAY FL 32404**

Mailing Address

**6817 HUGH DRIVE
CALLAWAY FL 32404**

2. Principal Place of Business

21. Suite, Apt., Rm., etc.

22. City & State

23. Zip

Country

24.

2a. Mailing Address

26. Suite, Apt., Rm., etc.

27. City & State

28. Zip

Country

29.

30.

3. Date Incorporated or Qualified

02/22/1988

3a. Date of Last Report

06/12/1995

4. FEI Number

59-2873195

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**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**TREVATHAN, JIMMIE O.
6817 HUGH DRIVE
CALLAWAY FL 32404**

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 607.03(2) and 607.03(3), 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. Thereby, accept the appointment as registered agent. I am familiar with, and accept the obligations of, Sections 607.03(2) Florida Statutes.

SIGNATURE

Date of Signature

Date

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. Title

2. Name

3. Street Address

4. City, St., Zip

5. Title

6. Name

7. Street Address

8. City, St., Zip

9. Title

10. Name

11. Street Address

12. City, St., Zip

13. Title

14. Name

15. Street Address

16. City, St., Zip

17. Title

18. Name

19. Street Address

20. City, St., Zip

21. Title

22. Name

23. Street Address

24. City, St., Zip

25. Title

26. Name

27. Street Address

28. City, St., Zip

1. Title

2. Name

3. Street Address

4. City, St., Zip

5. Title

6. Name

7. Street Address

8. City, St., Zip

9. Title

10. Name

11. Street Address

12. City, St., Zip

13. Title

14. Name

15. Street Address

16. City, St., Zip

17. Title

18. Name

19. Street Address

20. City, St., Zip

21. Title

22. Name

23. Street Address

24. City, St., Zip

25. Title

26. Name

27. Street Address

28. City, St., Zip

14. I do hereby certify that the information supplied by this filing is so verily furnished and does not equate, for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information indicated on the 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. 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 in change to, or on an attachment with an address.

SIGNATURE: *Jimmie O. Trevathan* President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-3-96

904871/593

CR2E034 (12/95)