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

Mailing Address

2669 SPRING CREEK HIGHWAY

JCT HWY 98 & ST RD 365

CRAWFORDVILLE FL 32327

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 **DOCUMENT # M85796**

1. Corporation Name

Principal Place of Business

JCT HWY 98 & ST RD 365

CRAWFORDVILLE FL 32327

2669 SPRING CREEK HIGHWAY

ALEXANDER COASTAL REALTY AND CONSTRUCTION, INC.

Sulte, Apt. #, etc. Sulte, Apt. #, etc. Sulte, Apt. #, etc. 27	2. Principal Pl	ace of Business	2a. Mailing	Address				4. FEI Number			Apr	lied For
Suite, Apt. #, etc. 27 27 28 27 3. 5. Certificate of Status Desired			26					59-2894578			Not	Applicable
City & State		# etc.		Apt. #, etc.						4	\$8.75 A	dditional
Trust Fund Contribution	2	., •	<u></u> —	•				5. Certificate of Status	Desired	Х		
Zip Country Zip	City & State	·	City &	State				-6. Election Campaign	Financing	п,	\$5.00	May Be
Zip Country Zip Country Zip Country State This corporation was the current year Intendplate Personal Propry Tax Yes No	:3		28					Trust Fund Contrib	ution		Added to	Fees
8. Name and Address of Current Registered Agent ALEXANDER, GALVESTON 2699 SPRING CREEK HIGHWAY CRAWFORDVILLE FL 32327 42 City Crawford or registered Agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. I hereby accept the objections of Sections of Sections 607.0502 and 607.1508, Florids Statutes, the above-named corporation's board of directors. I hereby accept the objection of Sections of		Country	Zip		Cou	ntry		8. This corporation ov	ves the curre	ent year Inta	angible	
ALEXANDER, GALVESTON 2689 SPRING CREEK HIGHWAY CRAWFORDVILLE FL 32327 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 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 amount of the purpose of changing its registered agent amount of the purpose of changing its registered agent and other agents of Section 07,0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE P OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME ALEXANDER, GALVESTON 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE P ALEXANDER, GALVESTON 12. NAME ALEXANDER, GALVESTON 13. SIRRETADORESS ORTH-ST-ZP TITLE ST ALEXANDER, LINDA G SIRRETADORESS ORTH-ST-ZP TITLE ORLETE 11. TITLE 12. INTLE 13. TITLE 14. TITLE 15. Change Additional Cha							_	Personal Property	Tax.		Yes	□No
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2669 SPRING CREEK HIGHWAY CRAWFORDVILLE FL 32327 381 382 Street Address (P.O. Box Number is Not Acceptable) 882 Street Address (P.O. Box Number is Not Acceptable) 883 384 City FL 885 Zip Code	<u> </u>					81	Name					
2689 SYRING CREEK HIGHWAY CRAWFORDVILLE FL 32327 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 agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby eccept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signatur, hand a printed name and registered agent and dief registants (NOTE Registered Agent appraise required when remotating) DATE 12. OFFICERS AND DIRECTORS IN 12 TITLE ALEXANDER, GALVESTON 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS IN 12 TITLE ALEXANDER, GALVESTON 13. TREET ADDRESS STREET ADDRESS CRAWFORDVILLE FL DELETE 11. TITLE ALEXANDER, LINDA G SIRGET ADDRESS CITY-ST-2P TITLE ALEXANDER, LINDA G SIRGET ADDRESS CITY-ST-2P TITLE ALEXANDER, LINDA G SIRGET ADDRESS CITY-ST-2P TITLE ALEXANDER, GALVESTON ASTREET ADDRESS CITY-ST-2P TITLE ALEXANDER, LINDA G SIRGET ADDRESS CITY-ST-2P TITLE ALEXANDER, LINDA G ALEXANDER, LINDA G SIRGET ADDRESS CITY-ST-2P TITLE ALEXANDER, LINDA G ALEXANDER,	ALEXANDER, GALVESTON					02	Ctreat Addra	oo /D O Boy Number is	Not Accepto	hlal		
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agent. 1 am familiar with, and accept the obligations of, Section 607.0905, Florida Statutes. SIGNATURE Signature Parties Part	office or re	egistered agent, or both, in the State of	Florida, Such	change was aut	norized	i by t	he corporation	n's board of directors. I h	ereby accep	t the appoir	ntment as reg	jistered
Signature, hypodrog printed name of registered agener and tills if applications (NOTE: Repositived Agener departed when reinstalling) DATE	agent. I ai	m familiar with, and accept the obligation	ns of, Section	1 607.0505, Floric	la Statı	utes.						
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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, with all other like empowered.	officer or Block 12	director of the corporation or the receiv or Block 13 if changed, or on an attach	er or trustee e ment with an a	impowered to exe address, with all o	ecute tr other lik	us re ce em	port as requir powered.	ed by Chapter 607, FIOR	ua oldluigs;	anu marm	, name appe	ruid III

SIGNATURE:

FILED

Mar 26, 1999 8:00 am Secretary of State

03-26-1999 90039 036 ***158.75

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

06/16/1988