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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOGUMENT # P10760

HSM CONSTRUCTION SERVICES, INC.

FILED
Jan 27 1997 8:00am
Secretary of State

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Principal Place				T (CENTREM (ANT INDIX CONTA YOUTH DINNY ADDIX	ITOTT BABAT BABAT BI	IAH OTAH I)(0 11 1 00 1		
11701									
315 St Louis Mo	63146	315 ST LOUIS M	0 63146-4194						
US		US	US 3.		3. Date Incorporated or Qualified 07/11/1986	3a. Date of Last Report 01/31/1996			
2. Principal Pl	ace of Business	2a. Mailing A	Address			4. FEI Number		Ар	plied For
21		26			<u></u>	43-1388410			t Applicable
Suite, Apt 1	#. 6te	Suile, Ap	ot. #, etc.			5. Certificate of Status Desired		8.75 A Fee Re	Additional
22] City & State		27 City & St	ate			6. Election Campaign Financing			May Be
23						Trust Fund Contribution		Added to	
Zip	Country	Zip	Zip Country		8. This corporation has liability for it				
24	25	29	3	0			Yes No		
	9. Name and Address of C	urrent Registered Age	ent		T	10. Name and Address of New Reg	lstered Ager	nt	
	der maten, larry d.			81	Name				
	i sweetwater Club Blvi Igwood fl 32779	D.		82	Street Add	dress (P.O. Box Number is Not Acceptab	e)		
LOIT	MINON I F OF 119			83					
				84	City		85	Zip (înde.
				64	City		FL "	, sip t	700 0
SIGNATURE .	n familiar with, and accept the o					uited when reinstating)	DATE		
12.		S AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIR	ECTOR	S IN 12
Til.,F	PD		DELETE	1.1 TITLE				Change	Addition
NAME	VANDER MATEN, LARRY	D.		1.2 NAME					
STREET ADORESS	1071 SWEETWATER CLUI	B BV.		1.3 STREE	T ADDRESS				
CHY-SI-Zil	LONGWOOD FL			1.4 CITY -	ST - ZIP				·
THILE	ST		DELETE	21 TITLE	ĺ			Change	Addition
NAME	NETEMEYER, LOUIS	in Loon	nes Deive	2.2 NAME					
STREET ADDRESS	NETEMEYER, LOUIS 1810 CRAIG RD ₩113 ST. LOUIS MO	GUNDA TO	40 XXVVC	2.3 STREE	T ADDRESS				
C-1Y - S1 - 7IP	ST. LOUIS MO			·	ST-ZIP			01	
TILLE		L.	DELETE	3 1 TITLE			□ '	Change	Addition
NAVe				3 2 NAME	r apported				
SIREET ADDRESS				1	r ADDRESS				
CITY - ST - Zi ² Tifle		T	DELETE	3.4. CITY -	31 - EFF		П	Change	Addition
NAME		L		4. 2 NAME			1	a-	
STREET ADDRESS) ADDRESS				
CITY ST - ZIF				4.4 CITY -:	1				
TIFEE			DELETE	51 TITLE				Change	Addition
NAMÉ				5.2 NAME					
STREET ADDRESS				5.3 STREE	T ADDRESS				
CITY - ST - ZIP				5 4 CITY -	ST-ZIP				
TilgE		L	DELETE	61 TITLE				Change	Addition
NAME				62 NAME					
STREET ADDRESS				63 STREE	T ADDRESS				
CITY - ST - 7IP				6.4 C/TY -					·
14. do heret	by certify that the information su	pplied with this filing d	oes not qualify	for the exi	emption state	ed in Section 119.07(3)(i), Florida Statutes	. I further cer	tify that	the

information indicated on this annual report as implemental 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 or an attachment with an address.

SIGNATURE:

0483304