FILED Feb 22, 1999 8:00 am

Secretary of State

02-22-1999 90082 043 \*\*\*150.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

10/04/1988

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

Mailing Address

ALBANY NY 12203-8001

DELETE

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BOX 38001

HS

**PROFIT** CORPORATION ANNUAL REPORT

Principal Place of Business

ALBANY NY 12203-8001

BOX 38001

CITY-ST-ZIP

STREET ADDRESS

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FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

4

1999

DOCUMENT # P21170 1. Corporation Name

BETHLEHEM CONSTRUCTION CORP.

WOLANIN, GREGORY M.

ALBANY NY 12203

WOLANIN, JULIA

ALBANY NY 12203

TD

1704 WESTERN AVENUE BOX 38001

1704 WESTERN AVENUE, BOX 38001

2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 26 <u>14-1575962</u> 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5,00 May Be Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation owes the current year Intangible Ζiρ Country Zip □No 30 Personal Property Tax. 25 29 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name WOLANIN, V.M. Street Address (P.O. Box Number is Not Acceptable) 82 **B. HILLMYER LAW OFFICE** 2135 COTTAGE STREET 83 FORT MYERS FL 33902 84 Zip Code City 85 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. 05, Florida Statutes SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Addition DELETE Change 1.1 TITLE TITLE **PSD** 1.2 NAME WOLANIN, VINCENT M. NAME 1.3 STREET ADDRESS 2135 COTTAGE STREET STREET ADDRESS FT. MYERS FL 33902 1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

3.1 TITLE

3.2 NAME

4.1 TITLE

4, 2 NAME

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

2.3 STREET ADDRESS

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

2.4 C/TY-ST-ZXP

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, from an attachment with an address, with all after like empowered.

SIGNATURE:

518 456-9200

CR2E034 (11/98)

Addition

☐ Addition

Addition

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