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

**CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P39073

SOUTHWIND CONSTRUCTION CORP. OF INDIANA

Principal Place of Business Mailing Address 14649 HIGHWAY 41 NORTH 14649 HIGHWAY 41 NORTH **EVANSVILLE IN 47711 EVANSVILLE IN 47711** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/28/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 35-1474620 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible XXYes 24 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD., Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 84 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

CT CORPORATION Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE \_\_ Change Addition TITLE 1.1 TITLE **SEIBERT, DONALD** 1.2 NAME NAME 14649 HIGHWAY 41, NORTH STREET ADDRESS 1.3 STREET ADDRESS **EVANSVILLE IN** CITY-ST-ZIP 1.4 CiTY - ST - 7IP DELETE 2.1 TITLE ☐ Change ☐ Addition TITLE SEIBERT, LEANNE NAME 2.2 NAME **14649 HIGHWAY 41, NORTH** STREET ADDRESS 2.3 STREET ADDRESS **EVANSVILLE IN** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE SEIBERT, LEANNE NAME 3.2 NAME 14649 HIGHWAY 41 NORTH STREET ADDRESS 3.3 STREET ADDRESS **EVANSVILLE IN** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE **DANIEL KOESTER** NAME 4.2 NAME 14649 HIGHWAY 41, NORTH STREET ADDRESS 4.3 STREET ADDRESS **EVANSVILLE IN** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE LEANNE SIEBERT NAME 5.2 NAME 14649 HIGHWAY 41 NORTH STREET ADDRESS **5.3 STREET ADDRESS EVANSVILLE IN** CITY-ST-ZIP 54 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP 6.4 CITY - ST - ZIP

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 attachment with an address.

FILED

Mar 24 1998 8:00am

Secretary of State