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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998

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FLORIDA DEPARTMENT OF STATE

## Sandra R. Mortham

Secretary of State DIVISION OF CORPORATIONS

P92000009354 (1) DOCUMENT #

HOLLYWOOD CONSTRUCTION, INC. Principal Place of Business Mailing Address 3003 STATE AVE P.O. BOX 7429 PANAMA CITY FL 32405 LAGUNA BOH FL 32413 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/03/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-3157451 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. □ No 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name golden, linda p 3003 STATE AVE Street Address (P.O. Box Number is Not Acceptable) PANAMA CITY FL 32405 83 84 City 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE GOLDEN, RONNIE D NAME 1.2 NAME P.O. BOX 7429 N/A STREET ADDRESS 1.3 STREET ADDRESS PANAMA CITY FL CITY-ST-ZIP 1.4 City - ST-ZIP Addition TITLE DELETE 2.1 TITLE Change NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST- ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE ☐ Change Addition 4.1 TITLE TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 City - ST - ZiP DELETE Change Addition TITLE 5.1 THILE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE Change Addition TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 64 CITY-ST-7IP

14. Thereby certify that the information supplied with this lifting 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 supplicitlental annual report or supplicitlental annual report or supplied in the following supplied to supplied the exemption of the corporation or the receiver or year open powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if chapter 607 in that my name appears in Block 13 if chapter 607.

**FILED** 

Apr 28 1998 8:00am

Secretary of State