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

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

FILED

Apr 29 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9300001635 (0)

FREDERICK'S CONSTRUCTION COMPANY, INC.

| Principal Place of Business 1267 SECOND ST SARASOTA FL 34236 US | | | | Mailing Address 1267 SECOND ST SARASOTA FL 34236-5506 US | | | | ((60)(00) (01 11)(0 (1))(00)() (0) | 'EH Bûld Bûld | AIDIA BAADE HAAI | UIII TUGI |
|--|---------------------|--|-----------|---|----------------|---------------|--------------------------------|---|--------------------|------------------------------------|--------------------------|
| | | | | | | | | | | | |
| | | | | | | | | Date Incorporated or Qualified 01/04/1993 | | Date of Last Re /03/1996 | eport |
| 2. Principal Place of Business | | | | 2a. Mailing Address | | | | 4. FEI Number | | | plied For |
| 21 | | | | 26 | | | | 65-0380287 | | No | t Applicable |
| Suite, Apt. #, etc. | | | | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | X | \$8.75 A | |
| 22 City & State | | | | City & State | | | * Flootion Comparing Expansion | | Fee Re | · | |
| 23 | | | | 28 | | | | 6. Election Campaign Financing Trust Fund Contribution | | \$5.00 Added to | |
| Zip | Country | | | Zip | ?ip Countr | | | 8. This corporation has liability for | | | 199.032, |
| 24 | | 25 | | 30 | | Ţ | | | Yes | | |
| | | and Address of Curren | t Regis | tered Agent | | 81 | Name | 10. Name and Address of New F | legistered | Agent | |
| FREDERICK, D J 296 PINE RANCH TRAIL | | | | | | 82 | | | | | |
| OSPREY FL 34229 | | | | | | | Street Ad | ddress (P.O. Box Number is Not Acceptable) | | | |
| OUT | 1161 16 07 | LLO | | | | 83 | | | | | |
| | | | | | | 84 | City | | | 85 Zip C | Code |
| | | | | | | | l | FL T | | | |
| office or r | registerad ac | sions of Sections 607.0503 gent, or both, in the State with, and accept the obliga | of Florid | da. Such change was : | authorize | ed by | / the corpo | orporation submits this statement for the ration's board of directors. I hereby acc | purpose ept the ap | of changing its pointment as i | registered registered |
| SIGNATURE | C(a-a)-a- | dor printed name of registered ager | | 2 - 101 | | : | | quired when reinstating) | | | |
| 12. | orginature, typicic | OFFICERS AND | | | 13. | id Age | an signature re | ADDITIONS/CHANGES TO OFF | | D DIRECTOR | S IN 12 |
| TITLE | Р | | | DELETE | 1.11 | ILE | | | | Change | Addition |
| NAME | FREDER | | | | 1.2 N | AME | | | | | |
| STREET ADDRESS | | RANCH TRAIL | | | 1.3 S | TREET | ADDRESS | | | | ļi |
| CITY-ST-ZIP | OSPREY | <u>rt</u> | | DELETE | | 11Y - S | 1- ZIP | | | Channe | Addition |
| TITLE NAME | | CK, DEBORAH E. | | C) prece | 2.1 T 2.2 N | | 1 | | | ∐ Change | Addition |
| STREET ADDRESS | | RANCH TRAIL | | | | | ADDRESS | | | | |
| CITY-ST-ZIP | OSPREY | | | | | | SI - ZIP | | | | |
| TITLE | | ······································ | | DELETE | 311 | | | | | Change | Addition |
| NAME | | | | | 3.2 6 | IAME | | | | | |
| STREET ADDRESS | | • | | | | | ADDRESS | | | | |
| CITY-ST-ZIP | | | | DELETE | | | ST-2IP | | | Change | Addition |
| TITLE NAME | | | | T) DECEIR | 4.1.1 | NAME | | | | ∐ Change | □ Voquion } |
| STREET ADDRESS | | | | | | | ADDRESS | | | | ļ |
| CITY-ST-ZIP | | | | | | | ST-ZIP | | | | |
| TITLE | | | | DELETE | 5.1 T | | | | | Change | Addition |
| NAME | | | | | 5.2 N | IAME | | | | | Í |
| STREET ADDRESS |] | | | | | | ADDRESS | | | | Ì |
| CITY-ST-ZIP | | | | DELETE | | | 31 - 7IP | | | | |
| TITLE | | | | L_1 DETETE | 6.1 T | IILE | - | | | ☐ Change | ☐ Addition |

14. I do 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 logal 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.