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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9300004851 (0)

CONSTRUCTION SITE MANAGEMENT, INC.

## FILED May 01 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address						
1156 BAYVIEW		1156 BAYVIEW LANE						
GULF BREEZE FL 32561-2714 GULF BREEZE FL 32561-2714					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified			
					01/15/1993			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	7/	Applied For	
21 705	Palomar Dr	26			59-3161472	Tr.	Not Applicable	
Sulte, Apt.		Suite, Apt. #, etc.	11		5. Certificate of Status Desired	\$8.75	Additional	
22		27	V 15		5. Certificate of Status Desired	Fee F	Required	
City & State	9 ,	City & State	49	7.	6. Election Campaign Financing	\$5.00	May Be	
23 tens	sacola I-L	28	r	L	Trust Fund Contribution	Added	to Fees	
Zip	Country	Zip	Country	/	8. This corporation owes or has paid the co			
24 3250	) 1 25 ESCAMDIA		30		Personal Property Tax due June 30.		∐ No	
		Registered Agent		1	10. Name and Address of New Registered	Agent		
	ARK, CONNIE		81	Name				
1156 BAYVIEW LANE					82 Street Address (P.O. Box Number is Not Acceptable)			
GUI	LF BREEZE FL 32561-2714							
			83				- 1	
			84	City		<b>85</b> Zir	Code	
			"	City	FI	_   00		
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	es, the abov	e-named co	rporation submits this statement for the purpose	of changing	Its registered	
office or re	<b>egiste</b> red agent, or both, in the State om <b>fa</b> miliar with, and accept the obligation	it Florida. Such change was a ions of, Section 607,0505, Flo	authorized b orida Statute	y ine corpor s.	ation's board of directors. I hereby accept the ap	poiniment a	.s registered	
		,						
SIGNATURE	Signature, typed or printed name of registered agon	and title if applicable (NOT)	E: Registered Ag	en! signature teq	uired when reinstaling) DATE			
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	D	DELETE	1.1 TITLE			Change	. [_] Addition	
NAME	CLARK, CONNIE		1.2 NAME		0.			
STREET ADDRESS	1156 BAYVIEW LANE		1.3 STREE	T ADDRESS	705 PAlomar Dr Pensacola, F2 32507			
CITY-ST-ZIP	GULF BREEZE FL 32561-2714		1.4 CITY-1	ST-ZIP	tensacola, 12 32501			
TITLE	-	DELETE	21 TITLE		·	Change	: ∐ Addition	
NAME			2.2 NAME					
STREET ADDRESS			23 STREE	T ADDRESS				
CITY-ST-ZIP			2.4 CITY-	ST-ZIP				
TITLE		☐ DEL <b>ET</b> E	3.1 TITLE			L Change	:	
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREE	T ADDRESS				
CITY-ST-ZIP			3.4. CITY-	ST-ZIP				
TITLE		DELETE	4.1 TITLE			Change	Addition	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREE	T ADDRESS				
CITY-ST-ZIP			4.4 CITY -	ST-ZIP	_			
TITLE		DELETE	5.1 TITLE			Change	Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	T ADDRESS				
CITY - ST - ZIP			5.4 CITY -	ST-ZIP				
TITLE		DELETE	6.1 TITLE			Change	Addition	
NAME			6.2 NAME					
STREET ADDRESS				T ADDRESS				
			6.4 CITY-					
CITY-ST-ZIP	and 6, that the information supplied will	b this filing does not qualify for			in Section 119.07(3Vi) Florida Statutes, I further	certify that th	ne information	

. I nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(), 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.

950 133727