## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

P93000011223 (3)

RICHARD GARSON CONSTRUCTION, INC.

Principal Place of Business Mailing Address							-{ 	<b>Voil Doill Bo</b> il	<u> </u>		
220 CARDINAL DRIVE 220 CARDINAL DRIV MELBOURNE BEACH FL 32951 MELBOURNE BEACH											
							3. Date Incorporated or Qualified 02/12/1993	3a. Dat	04/27/		
2. Principal Plac	2a. Mailing /	2a. Mailing Address				4. FEI Number			Applied For		
1]		26				· · · · · · · · · · · · · · · · · · ·	<b>59-3171384</b> Not Applicable				
Suite, Apt. #	, etc.	Suite, Apt. #, etc.					5. Certificate of Status Desired	Certificate of Status Desired \$8.75 Additional Fee Required			
City & State		City & Si 28	tate				Election Campaign Financing     Trust Fund Contribution	/0		00 May Be ed to Fees	
Zip 4	Country 25	Zip <b>29</b>		Countr 30	у		8. This corporation has liability of Florida Statutes Yes	r intangible t s	ax under s	199.032,	
	9. Name and Address of Curren	t Registered Ag	ent				10. Name and Address of New	Registered	Agent		
				8.	۱	Name					
VAUGHAN, MICHAEL J 265 PELICAN DRIVE				82	2	Street Addres	s (P.O. Box Number is Not Acceptable)		<del></del>		
MELBOURNE SHORES FL 32951				83	3				<u></u> ,,		
				84	4	City			<b>85</b> Z	ip Code	
11. Pursuant to	the provisions of Sections 607.0502	and 607 1508 F	Iorida Statuto	s the above	1	amod corporat	ion rubmits this platement for the m	FL	-		
or registere	d agent, or both, in the State of Florid , and accept the obligations of, Section	ia. Such change i	was authorize	RO DV THA COC	por	ration's board	of directors. I hereby accept the ap	urpose or ch pointment as	anging its s registera	registered office d agent. I am	
SIGNATURE	, and accept the congations of, section	JN 607.0505, FJ08	noa Statutes.								
SIGNATURE	gnature, typed or printed name of registered agent a	and title if applicable.	(NOT	L. Registured Age	ent s	signature required w	hen reinstating)	DATE		•	
12.	OFFICERS AND			13.			ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTO	ORS IN 12	
TITLE	VALICUANI MICHAELI		DELETE	1.1 THLE					Change:	Addition	
NAME	VAUGHAN, MICHAEL J.			1.2 NAME							
STREET ADDRESS	265 PELICAN DRIVE MELBOURNE SHORES FL			1.3 STREE	T AI	DDRESS					
CHTY - ST - ZIP	VP VP			1.4 CITY -		ZIP					
TITLE	KUNSMAN, STEVE J	Ц	DELETE	2. 1 TITLE				(	Chang⊬	Addition	
NAME	5247 7TH LANE SW			2.2 NAME							
STREET ADDRESS	VERO BEACH FL	•		23 STREE	T A	DORESS					
CITY-ST-ZIP	T		DEVETE	24 CITY-		ZIP				·	
NAME	SLAGGY, JEFFREY	LJ	DELETE	3 1 TITLE				Į.	Change	Addition .	
STREET ADDRESS	6715 DOROTHY LANE			3.2 NAME							
CITY-ST-ZIP	PORT ST. LUCIE FL			3.3 STREE		•					
TITLE			DELETE	3.4 CITY - 4. 1 TITLE		ZIP			7 Chanar	- Additon	
NAME			0	4.2 NAME				L	Change	☐ Addition	
STREET ADDRESS				4.3 STREE		OUBLEC					
COY-SI-ZIP				4.4 CITY-							
INLE			DELETE	5 1 TITLE		£11			Change	Addition	
NAME				5.2 NAME					~ ~A.		
STREET ADORESS				53 STREE		ODRESS				į	
DITY-ST-ZIP				5.4 CITY-							
TITLE			DELETE	6 1 TITLE	•	<del></del>		ſ	Change	Addition	
NAME				6.2 NAME							
STREET ADDRESS				6.3 STREE		DDRESS					

6 4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Fiorida 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 in changed, or on an appearance of the corporation of 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 in changed, or on an appearance of the corporation of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify 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. I further certify 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. I further certify 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. I further certify 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. I further certify 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. I further certify that I am an officer or director of the corporation or the receiver of the corporation of the corp