

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathison
Secretary of State
Tallahassee, Florida 32399-0001

APPROVED
AND
FILED

10 MAY 11 1996 10:25

SECRET
TALLAHASSEE, FLORIDA

DOCUMENT # P93000021686 (9)

1. Corporation Name

PEACE OF MIND CONSTRUCTION COMPANY

Principal Place of Business
976 S.W. 102ND TERRACE
PEMBROKE PINES FL 33025

Mailing Address
976 S.W. 102ND TERRACE
PEMBROKE PINES FL 33025

DO NOT WRITE IN THIS SPACE

3. Date incorporated or organized 03/18/1993 3a. Date of Last Report 05/01/1994

4. FEI Number 59-2160653 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for information fee under 1994 C.S. Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21. City, Apt. #, etc. 26. Mailing Address

22. City & State 27. Suite, Apt. #, etc.

23. City & State 28. City & State

24. City & State 25. City & State 29. City & State 30. City & State

9. Name and Address of Current Registered Agent

GANN, WILLIAM R
976 S.W. 102ND TERRACE
PEMBROKE PINES FL 33025

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number, if Not Applicable)
83.
84. City FL 85. Zip Code

11. Pursuant to the provisions of Sections 607.01(2) and 607.01(3), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent for both in the State of Florida. Such change was authorized by the corporation's board of directors, thereby accept the appointment of registered agent. I am filing with and accept the obligations of Sections 607.01(2), Florida Statutes.

SIGNATURE William R. Gann President

William R. Gann

5-8-95

12. OFFICERS AND DIRECTORS

1. NAME PST GANN, WILLIAM R Gann
2. STREET ADDRESS 976 SW 102 TERR
3. CITY, STATE, ZIP PEMBROKE PINES FL
4. NAME ~~WILLIAM R. GANN~~
5. STREET ADDRESS ~~976 SW 102 TERR~~
6. CITY, STATE, ZIP ~~PEMBROKE PINES FL 33025~~
7. NAME
8. STREET ADDRESS
9. CITY, STATE, ZIP
10. NAME
11. STREET ADDRESS
12. CITY, STATE, ZIP
13. NAME
14. STREET ADDRESS
15. CITY, STATE, ZIP
16. NAME
17. STREET ADDRESS
18. CITY, STATE, ZIP
19. NAME
20. STREET ADDRESS
21. CITY, STATE, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.

1. NAME PST Gann, William R. ☐ Change ☐ Addition
2. NAME ~~WILLIAM R. GANN~~
3. STREET ADDRESS ~~976 SW 102 TERR~~
4. CITY, STATE, ZIP ~~PEMBROKE PINES FL 33025~~
5. NAME ~~WILLIAM R. GANN~~
6. STREET ADDRESS ~~976 SW 102 TERR~~
7. CITY, STATE, ZIP ~~PEMBROKE PINES FL 33025~~
8. NAME
9. STREET ADDRESS
10. CITY, STATE, ZIP
11. NAME
12. STREET ADDRESS
13. CITY, STATE, ZIP
14. NAME
15. STREET ADDRESS
16. CITY, STATE, ZIP
17. NAME
18. STREET ADDRESS
19. CITY, STATE, ZIP
20. NAME
21. STREET ADDRESS
22. CITY, STATE, ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.02(1)(b), Florida Statutes. I further certify that the information is included on this annual report or supplementary annual report as true and accurate and that my signature shall bind me to the same for the purpose of this filing. I am filing with and accept the obligations of Sections 607.01(2), Florida Statutes, and that my name appears on Block 12 of Block 13 of this report, or on an attachment with an address.

SIGNATURE: William R. Gann William R. Gann 5-8-96 305-4326302
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR