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Mar 25 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P93000033992 (7)**

1. Corporation Name

ORR CONSTRUCTION, INC.



Principal Place of Business

**169 PLANTATION SHORES DR.
TAVERNIER FL 33070
US**

Mailing Address

**169 PLANTATION SHORES DR.
TAVERNIER FL 33070
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/10/1993

4. FEI Number

65-0408724

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 110 GIARDINO DR.

Suite, Apt. #, etc.

22

City & State

23 Islamorada

Zip

24 33036

Country

25 USA

2a. Mailing Address

26 P.O. Box 1464

Suite, Apt. #, etc.

27

City & State

28 TAVERNIER

Zip

29 33070

Country

30 USA

9. Name and Address of Current Registered Agent

**ORR, ROBERT K
169 PLANTATION SHORES DR
TAVERNIER FL 33070**

10. Name and Address of New Registered Agent

81 Name ROBERT K. ORR

82 Street Address (P.O. Box Number is Not Acceptable)

110 GIARDINO DR.

83

84 City ISLAMORADA

FL

85 Zip Code 33036

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**NAME
ORR, ROBERT K.
STREET ADDRESS
169 PLANTATION SHORES DR.
CITY - ST - ZIP
TAVERNIER FL**

TITLE ☐ DELETE

**NAME
ORR, VALERIE C
STREET ADDRESS
169 PLANTATION SHORES DR
CITY - ST - ZIP
TAVERNIER FL**

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY - ST - ZIP**

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY - ST - ZIP**

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY - ST - ZIP**

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY - ST - ZIP**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I 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 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.

SIGNATURE:

Edith Kern

3/20/98

305-852-2210

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