

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

FILED

Jan 30 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000037946 (9)

1. Corporation Name
EXCELL CONSTRUCTION SERVICES, INC.



Principal Place of Business
140 BOBWHITE RD
ROYAL PALM BEACH FL 33411

Mailing Address
140 BOBWHITE RD
ROYAL PALM BEACH FL 33411-1733

3. Date Incorporated or Qualified 05/26/1993
3a. Date of Last Report 03/07/1996

2. Principal Place of Business
21 13479 ORCHID COURT
Suite, Apt. #, etc.

2a. Mailing Address
26 13479 ORCHID COURT
Suite, Apt. #, etc.

4. FEI Number 65-0415028
Applied For
Not Applicable

22 City & State
23 WELLINGTON, FL

27 City & State
28 WELLINGTON, FL

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24 Zip 33414
25 Country USA

29 Zip 33414
30 Country USA

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HOSTETLER, RONALD C.

140 BOBWHITE ROAD

ROYAL PALM BEACH FL 33411

81 Name same

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

13479 ORCHID COURT

83

84

WELLINGTON, FL

85

Zip Code 33414

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

Ronald C. Hostetler

Jan 6, 1997

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|--|---|---|
| TITLE | PT | 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | HOSTETLER, RONALD C | 1.2 NAME | |
| STREET ADDRESS | 140 BOBWHITE RD 13479 ORCHID CT. | 1.3 STREET ADDRESS | |
| CITY - ST - ZIP | ROYAL PALM BEACH FL Wellington, FL 33414 | 1.4 CITY - ST - ZIP | |
| TITLE | S | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | HOSTETLER, SHAUNA H. | 2.2 NAME | |
| STREET ADDRESS | 140 BOBWHITE RD 13479 ORCHID CT. | 2.3 STREET ADDRESS | |
| CITY - ST - ZIP | ROYAL PALM BEACH FL WELLINGTON, FL 33414 | 2.4 CITY - ST - ZIP | |
| TITLE | | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | |
| CITY - ST - ZIP | | 3.4 CITY - ST - ZIP | |
| TITLE | | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY - ST - ZIP | | 4.4 CITY - ST - ZIP | |
| TITLE | | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY - ST - ZIP | | 5.4 CITY - ST - ZIP | |
| TITLE | | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY - ST - ZIP | | 6.4 CITY - ST - ZIP | |

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ronald C. Hostetler

Jan 6, 1997 (361)-770-7120

Date

Daytime Phone #

CR2E034 (9/96)