Mailing Address

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P93000046333

1. Corporation Name

Principal Place of Business

CHUCK ENNS CONSTRUCTION COMPANY, INC.

263 1/2 EASY ST. FT. PIERCE FL 34982			P.O. BOX 3507 FT. PIERCE FL 34948					DO NOT WRITE IN THIS SPACE						
							3.	Date Incor	,	Qualifed	I			
2. Principal Place of Business			a. Mailing Address				4.	FEI Numbe					\vdash	plied For
21			26					65-0422	<u>685</u>				-	t Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5	Certifcate		esired	_ □.			Additional
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City & State	е .		City & State				6.	Election Ca	ampaign Fi	inancing				May Be
23		28						Trust Fund	Contributi	on			Added	to Fees
Zip	Count	лу	Zip		untry		. 8.	This corpo			rent year			
24	25	29		30				Personal F			=	<u> </u>		□No
	9. Name and Addr	ess of Current Regi	istered Agent		04	••	10.	Name and	Address	of New	Register	ed Agen	<u> </u>	
FAILE	0 01110V		,		81	Name								
263	S, CHUCK 1/2 EASY ST.				82	Street A	ddress (P	.O. Box Nu	mber is No	t Accep	table)			
	PIERCE FL 34982				83						e #1.4	, , '	- i	. 1
ř.					84	City		F1 -		* *		85	_ :'	Code
; ;					0~	City		•			F	L	,	1
office or o	to the provisions of Sec egistered agent, or both m familiar with, and acc	h, in the State of Flor	rida. Such change was	s authorized	d by th	named c ne corpor	orporation ation's bo	n submits the	nis stateme ctors. I her	nt for the eby acce	e purpose ept the ap	of chan pointme	ging its nt as re	registered gistered
agent. I a			•											I
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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 of 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, with all other like empowered.

SIGNATURE:

561-4166-3974 Daytime Phone #

Feb 24, 1999 8:00 am

Secretary of State

02-24-1999 90036 049 ***150.00