

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000047569 (7)

1. Corporation Name

JOYCE CONSTRUCTION, INC.



Principal Place of Business
200 E. MAIN ST.
500 OLD GENEVA ROAD
GENEVA FL 32732

Mailing Address
200 E. MAIN ST.
P.O. BOX 1100
GENEVA FL 32732

2. Principal Place of Business
21 200 E. MAIN ST.
State, Apt. #, etc.

2a. Mailing Address
26 200 E. MAIN ST
State, Apt. #, etc.

22 City & State
23 GENEVA, FL

27 City & State
28 GENEVA, FL

24 Zip 32732 25 Country USA 29 Zip 32732 30 Country USA

9. Name and Address of Current Registered Agent

JOYCE, FRANK E
500 OLD GENEVA ROAD
GENEVA FL 32732

3. Date Incorporated or Qualified 06/23/1993
3a. Date of Last Report 04/27/1995
4. FEI Number 59-3195369
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 intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
200 E. MAIN ST.
83
84 City FL 85 Zip Code

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

Frank E. Joyce

Signature of Registered Agent (Signature required when changing agent)

Date

12. OFFICERS AND DIRECTORS
TITLE PVDC
NAME JOYCE, FRANK E
STREET ADDRESS 500 OLD GENEVA RD 200 E. MAIN ST
CITY-STATE-ZIP GENEVA FL 32732
TITLE ST
NAME JOYCE, PATRICIA A
STREET ADDRESS 500 OLD GENEVA RD 200 E. MAIN ST.
CITY-STATE-ZIP GENEVA FL 32732
TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
TITLE
NAME
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CITY-STATE-ZIP
TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-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), 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, unchanged, or on an attachment with an address.

SIGNATURE:

Patricia A. Joyce

PATRICIA A. JOYCE

01-19-96 (407)349-5203

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)