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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP

STREET ADDRESS

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CITY-ST-ZIP

TITLE

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000050839 (8)

CAPITOL BUILDING MAINTENANCE, INC.

Mailing Address Principal Place of Business 1066 CHOKECHERRY DRIVE 1088 CHOKECHERRY DRIVE WINTER SPRINGS FL 32708 WINTER SPRINGS FL 32708 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u> 07/15/1993</u> 2. Principal Place of Business 2a. Maiting Address 4. FEI Number Applied For 21 59-3196930 26 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name OHNSTAD, HENRY H. J 1066 CHOKECHERRY DRIVE Street Address (P.O. Box Number is Not Acceptable) WINTER SPRINGS FL 32708 83 84 City 85 Zip Code FI 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 txth, 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition Change TITLE 11TITLE OHNSTAD, HENRY H JR. NAME 1.2 NAME 1066 CHOKECHERRY DRIVE STREET ADDRESS 1.3 STREET ADDRESS WINTER SPRINGS FL 32708 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE GOTTHARD, DARRELL W NAME 22 NAME 16008 DAVENPORT ROAD STREET ADDRESS 23 STREET ADDRESS WINTER GARDEN FL 34787 CITY-ST-ZIP 2. 4 City-St-ZiP DELETE Change Addition THEF 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS

14. Thereby 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 13 if the page of the corporation of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

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4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

SIGNATURE

4-17-98 407-699-06-01

Change

Change

Addition

Addition

☐ Addition

FILED

Apr 24 1998 8:00am

Secretary of State

CR2E034 (10/97)