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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P93000055701

1. Corporation Name

DAVID P DUTTON GENERAL CONTRACTOR INC.

FILED Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90057 025 ***158.75



Principal Place of Business Mailing Address						1 19911991 110 19109 (1111 9211 4511) 98111	V#161 E1101 F1111 1881	1 54151 7151 (85 4	
3722 AFTON WAY		3722 AFTON WAY							
SARASOTA FL 34233		SARASOTA FL 34233				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			ļ
						08/06/1993			
2. Principal Pl	ace of Business	2a. Mailing Addre	2a. Mailing Address			4. FEI Number	A	pplied For	
21		26	26			65-0438252		ot Applicable	Į
Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional equired	_
22		27							-
City & State		City & State	_ '			6. Election Campaign Financing		May Be	
Zip Country			Zip Country			Trust Fund Contribution Added to Fees			
Zip	Country	Zip		umy		This corporation owes the current ye Personal Property Tax.	ar intangibie ∐Yes	ZINO.	
24 25 9. Name and Address of Curre		29	[30]	30		10. Name and Address of New Registr			1
	5. Name and Address of Ou	inent Registered Agent		81	Name				1
DUT	TON, DAVID P								ł
	AFTON WAY				Street Addr	dress (P.O. Box Number is Not Acceptable)			
SAR	ASOTA FL 34233						*****		1
				Ш			1.21-2.		1
•				84	City		FL	Code	
office or re	to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the ol	tate of Florida. Such chang	e was authorize	d by t	the corporation	oration submits this statement for the purpo on's board of directors. I hereby accept the a	se of changing its appointment as re	a registered egistered	
. •	ii izinilizi witii, and decept the of	singularia di, additari dari a	see, monde one						
SIGNATURE	Signature, typed or printed name of registere	d agent and title if applicable.	(NOTE: Registere	d Agent	signature required	d when reinstating) DA			6
12.	OFFICERS	S AND DIRECTORS	13			ADDITIONS/CHANGES TO OFFICER			
TITLE	P	□ DE	LETE 1.11	TTLE	İ		☐ Change	☐ Addition	3
NAME	Dutton, David P.		1.21	AME					3
STREET ADDRESS	3722 AFTON WAY		1.3 \$	STREET	ADDRESS	•			ļ
CITY-ST-ZIP	SARASOTA FL		1.4 CI		-ZIP				į
TITLE		□ DE	LETE 2.17	TITLE			☐ Change	Addition	`
NAME			2.21	MAME					1
STREET ADDRESS			2.3 \$	STREET ADDRESS					
CITY-ST-ZIP				CITY_ST	-ZIP			- DAJJeson	-
TITLE		☐ DE		ITLE			☐ Change	Addition	İ
NAME			3.21	AME	ļ				
STREET ADDRESS			3.3 \$	TREET	ADDRESS				
CITY-ST-ZIP	.,			CITY-ST	r-ZIP		□ Channa	Addition	┨
TITLE		☐ DE	LETE 4.11	TITLE			☐ Change	Addition	
NAME			■ î	NAME					
STREET ADDRESS			4.3 \$	TREET	ADDRESS	•			
CITY-ST-ZIP				CITY-ST	-ZIP			[m] Addition	┨
TITLE		□ DE		MLE.			☐ Change	Addition	ĺ
NAME				AME	*DDDCC				1
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				CITY-ST	-ZIP		Char	Addition	1
TITLE		☐ DE		ITLE			Change	☐ Addition	
NAME			1	VAME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			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, with all other like empowered.

SIGNATURE: