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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000056572 (9)

**CRONIN CONSTRUCTION CORPORATION** 

FILED Apr 22 1998 8:00am Secretary of State



		_ 1. 1/27								
Principal Place of Business Mailing Address										
327 S. COUNTY RD. 427 LONGWOOD FL \$2750 US		327 S. COUNTY RD. 427 LONGWOOD FL 32750 US				DO NOT WRITE IN THIS SPACE				
						3.	Date Incorporated or Qualified			
							08/09/1993			
2. Principal Pl	ace of Business	2a. Mailing Address				4.	FEI Number		Αţ	oplied For
21		26				<u>59-3195924</u>			ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5.	Certificate of Status Desired			Additional	
22		27							equired	
City & State		City & State			6.	Election Campaign Financing			May Be	
Zip	Country	Zip Country				Trust Fund Contribution	. Ц	~	to Fees	
	<u> </u>	<u></u>	¬ '			8.	This corporation owes or has p	_		langible No
24	9. Name and Address of Current	29 Registered Agent	30			10	Personal Property Tax due Jur Name and Address of New R			
CP	ONIN, RICHARD L			81	Name		734110 4112 74441003 01 11011	ogiololog in		
.Eac	COANE WAY . 560 Cre	ines Wau					· · · · · · · · · · · · · · · · · · ·			
-560 CRANE WAY 560 Cranes Way				82 Street Add			P.O. Box Number is Not Accepta	able)		
ALTAMONTE SPRINGS FL 32701			ŀ	83						
7.1	AMONIE SENNOS PE 32/01									
				84	City			FL	<b>85</b> 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.									ls registered registered	
SIGNATURE										
Signature, typed or painted mone of registered agent and late if applicable (NOTE Reg					nt signature rec			DATE		
12.	OFFICERS AND		13.				ADDITIONS/CHANGES TO OFF			
TITLE	Db	☐ DELET <b>Ē</b>		1.1 TITLE				f;	Change	Addition
NAME	CRONIN, RICHARD L			1.2 NAME		-,,	0.0000000000000000000000000000000000000	1164	2 2 5	
STREET ADDRESS	506 CRANE WAY, UNIT 228		1.3 \$1	REET	ADDRESS	360	cranes way,	- C 3 2	~ ~ /	l l
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	D be ere	1.4 CITY-ST-2		T-ZIP	Alto	Cranes Way, monte Springs,	FC 36	707	
TITLE	TV							L	_ Unange	☐ Addition
NAME	HAMMERSLEY, JAMES C.		2.2 NA	ME						
STREET ADDRESS	2254 MATTHEW CR.		2.3 ST	REET	ADDRESS					
CITY-ST-ZIP	DELTONA FL				T-ZIP		·	· · · · · · · · · · · · · · · · · · ·	7 01	
TITLE	ODONINI DEPODANTI	☐ DELETÉ			3.1 TITLE			L	Change	L. Addition
NAME	CRONIN, DEBORAH L.		3.2 NA							
STREET ADDRESS	560 CRANES WAY, UNIT 228 ALTAMONTE SPRINGS FL		3.3 STREET ADDRI							-
CITY-ST-ZIP	ALIAMONIE SPRINGS FL	D OUTT	3.4 Cit		T - ZIP				7 05	F"] 4.4490
TITLE		☐ DELETE						L	_] Change	L Addition
NAME			4. 2 N							
STREET ADDRESS			4.3 STREET ADDRESS							
CITY-ST-ZIP				4.4 CITY - S1 - ZIP					7 05	T Addition
TITLE	DELETE			5.1 TITLE				L	Change	☐ Addition
NAME			5.2 NA							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP		DELETE	54 CH		I - ZIP			<del></del>	T Cherry	Applica
TITLE		☐ OFFEH	6.1 1)1		1			L	_ Change	Addition
NAME			6.2 NA							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			64 CII	IY-SI	r-zip					

I hereby certify that the information expelled 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 of supplemental annual reports 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 trustes or powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an attachment with an address.

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