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FILED

Apr 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P93000065854 (0)

1. Corporation Name

JOHN YOLMAN BUILDERS, INC.

Principal Place of Business

717 SPRING LAKE BLVD
SEBRING FL 33870
US

Mailing Address

717 SPRING LAKE BLVD
SEBRING FL 33870-6279
US



3. Date Incorporated or Qualified

09/21/1993

3a. Date of Last Report

06/17/1996

2. Principal Place of Business

21 6048 Oak Leafe Cir

Suite, Apt. #, etc.

2a. Mailing Address

26 6048 Oak Leafe Cir

Suite, Apt. #, etc.

4. FEI Number

65-0438249

Applied For

Not Applicable

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

23 Sebring, FL

City & State

28 Sebring, FL

City & State

24 33870

Country

25 US

29 33870

Country

30 US

9. Name and Address of Current Registered Agent

YOLMAN, JOHN
717 SPRING LAKE RD
SEBRING FL 33870

10. Name and Address of New Registered Agent

81 Name

Yolman, John

82

Street Address (P.O. Box Number is Not Acceptable)

6048 Oak Leafe Cir

83

84

City

Sebring

FL

85 Zip Code

33870

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD
STREET ADDRESS 717 SPING LAKE BLVD
CITY - ST - ZIP SEBRING FL

TITLE ☐ DELETE

NAME STD
STREET ADDRESS YOLMAN, BEATRICE M
CITY - ST - ZIP 717 SPRING LAKE BLVD
SEBRING FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

6048 Oak Leafe Cir
Sebring, FL 33870

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

6048 Oak Leafe Cir
Sebring, FL 33870

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐

Change

☐

Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐

Change

☐

Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐

Change

☐

Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐

Change

☐

Addition

14. I do 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.

SIGNATURE:

John Yolman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/97

Date

941-655-5066

Daytime Phone #

0390812

CR2E034 (9/96)