

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

FILED  
Jul 06 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

Mailing Address

~~6048 OAK LEAF CR~~ 8616 Hampshire Dr  
SEBRING FL 33870  
US  
~~Sebring St 33870~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/21/1993

2. Principal Place of Business

21 ~~65-B S. Hwy 17-92~~  
Suite, Apt. #, etc.  
22 ~~8616 Hampshire Dr~~

2a. Mailing Address

26 ~~65-B S. Hwy 17-92~~  
Suite, Apt. #, etc.  
27 ~~Sebring St~~

4. FEI Number

65-0438249

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

YOLMAN, JOHN  
~~6048 OAK LEAF CR~~  
SEBRING FL 33870  
8616 Hampshire Dr  
Sebring FL 33870

10. Name and Address of New Registered Agent

B1 Name  
B2 Str. Address (P.O. Box Address Not Acceptable)  
B3 ~~65-B S. Hwy 17-92~~  
8616 Hampshire Dr 33870  
B4 City ~~Sebring~~ Sebring FL B5 Zip Code ~~33870~~

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named  
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 PD  
NAME YOLMAN, JOHN  
STREET ADDRESS ~~6048 OAK LEAF CR~~ 8616 Hampshire Dr.  
CITY-ST-ZIP SEBRING FL Sebring FL 33870

TITLE STD  
NAME YOLMAN, BEATRICE M  
STREET ADDRESS ~~6048 OAK LEAF CR~~ 8616 Hampshire Dr.  
CITY-ST-ZIP SEBRING FL Sebring FL 33870

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
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 65-B S. Hwy 17-92  
1.4 CITY-ST-ZIP DEBRAY, FL 32913

2.1 TITLE ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS 65-B S. Hwy 17-92  
2.4 CITY-ST-ZIP DEBRAY, FL 32913

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
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.

CR2E034 (10/97)