## 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 # P93000083393 (7)

SOUTHERN STYLE CONSTRUCTION, INC.

Principal Place of Business

Mailing Address

## **FILED** May 05 1998 8:00am Secretary of State



257 KETTLE ( CASSELBERR		257 KETTLE COURT CASSELBERRY FL 32707				DO NOT WRITE IN THIS	SPACE		
						3. Date Incorporated or Qualified 12/07/1993			
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		Applied For	
21		26				59-3212753	<b>59-3212753</b> Not Applicable		
Suite, Apt.	#, <b>9</b> 1C.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	9	City & State	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country 25	Zip 29	Cour	itry		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						10. Name and Address of New Registered	Agent		
HOUSE, CURTIS A.				81	Name				
257 KETTLE CT CASSELBERRY FL 32707				82	Street Add	et Address (P.O. Box Number is Not Acceptable)			
UA:	SOCIDERNI PL SZIVI			83					
ı				84	City	FL	85	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.									
SIGNATURE	Signature, typed or printed name of registered ar	nce and tile if popularable (NOTE	: Registered	Ager	nt signature requi	ired when reinstating) DATE			
12.		D DIRECTORS	13.	Mag.	tt signature rador	ADDITIONS/CHANGES TO OFFICERS AND	DIREC	TORS IN 12	
TITLE	P	DELETE 1.17					☐ Chai		
NAME	HOUSE, CURTIS A		1.2 NAM			·			
STREET ADDRESS	257 KETTLE COURT			1.3 STREET ADDRESS					
CITY-ST-ZIP				Y - S1	I-ZIP				
TITLE	81	DELETE 21					Cha	nge Addition	
NAME	HOUSE, DEBORA L			2.2 NAME				,	
STREET ADDRESS	257 KETTLE COURT		2.3 STREFT ADDRESS		ADDRESS				
CITY-ST-ZIP	CASSELBERRY FL			2.4 CITY-ST-ZIP		. ;			
TITLE	<b>VP</b> □ □ DELETE			3.1 TITLE			L Chai	nge 🔝 Addition	
NAME	DANIEL, ROBERT			3.2 NAME					
STREET ADDRESS	1241 CHEETAH TRAIL				ADDRESS				
CITY-ST-ZIP	WINTER SPRINGS FL	DELETE	3.4. CIT		T-ZIP	- ANN	☐ Cha	nge Addition	
TITLE		ריין מניננוג	4.1 7171				L Cila	ige E Houldoll	
NAME CTREET ADDRESS			4. 2 NA		ADDRESS				
STREET ADDRESS			4.4 CIT						
CITY-ST-ZIP TITLE		DELETE	5.1 TIT		-411		☐ Cha	nge Addition	
NAME				5.2 NAME			_	"	
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			5.4 CIT						
TITLE		DELETE	6.1 7(1)		-"		Cha	nge 🔲 Addition	
NAME			6.2 NA	WE	-			İ	
STREET ADDRESS			6.3 STF	REETA	ADDRESS				
CITY-ST-ZIP			6.4 CIT						
44 11	<del></del>	the thin titing slope pot qualific fo				Postion 110 07/3/(i) Florida Statutas I further or	416. 45		

Increase coming that the information supplied with this filling 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 convertion 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.

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