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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P94000011355 (2)

ADVANCED DESIGN CONTRACTING, INC.

Principal Place of Business

Mailing Address

FILED Apr 29 1997 8:00am Secretary of State



1811 J & C BLV NAPLES FL 339		1811 J & C BLVD NAPLES FL 33942 US					
US				3. Date Incorporated or Qualified 02/10/1994	3a. Date of Last Report 05/01/1996		
	lace of Rusiness	2a. Mailing Address		4. FEI Number	Ar	pplied For	
21 265	57 AFT AVE	26 P. O. BOX	19927	65-0467560	No	ot Applicable	
Suite, Apt 22	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	, , , , , , , ,	Additional equired	
City & State	PLES, FL	City & State 28 NAPLES	FL	Election Campaign Financing Trust Fund Contribution		May Be to Fees	
Zip 341	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	29 34101 3	Country O USA		Yes No	; 199.032,	
	9. Name and Address of Currer	nt Registered Agent	81 Name	10. Name and Address of New Re	Jistered Agent		
	JCH, JOHN I		o Name	81 Name			
6TH	GOODLETTE ROAD FLOOR		82 Street Address (P.O. Box Number is Not Acceptable)				
NAPL	ES FL 33940		63			ĺ	
			84 City		FL	Code	
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with and accept the oblig	of Florida, Such change was aut	thorized by the corp	corporation submits this statement for the p coration's board of directors. I hereby accep	urpose of changing in the appointment as	ts registered registered	
SIGNATURE	_						
12.	Signature, typed or printed name of registered age	ent and title if applicable (NOTE: F D DIRECTORS	legislered Agent signature	required when re-instating) ADDITIONS/CHANGES TO OFFICE	DATE CERS AND DIRECTOR	RS IN 12	
TITLE	DPS OF FICERS AIN	DELETE	1.1 TITLE	ADDITIONOJO PRINCED TO OTT IC	☐ Change	Addition	
NAME	HALL, MARION N	<i>F</i>	1.2 NAME				
STREET ADDRESS	1811 J & C BLVD		1.3 STREET ADDRESS				
CITY - ST - ZIP	NAPLES FL		1.4 CITY - ST - ZIP				
TILLE	DVT	DELETE	21 TITLE		Change	Addition	
NAME	HALL, WILLIAM A III		2.2 NAME	11: A - A 115			
STREET ADDRESS	1811 J & C BLVD		2.3 STREET ADDRESS	2657 AFT AVE.			
CHTY - ST - ZIP	NAPLES FL		2. 4 CITY-ST-ZIP			_	
TITLE		☐ DELETE	3.1 TITLE	·	Change	Addition	
NAME			3.2 NAME	HAll William A. IV	,		
STREET ADDRESS			3.3 STREET ADDRESS	2657 AFT AVE			
City-St-ZiP			3.4. CITY-ST-ZIP	HAIL WILLIAM A. IV 2657 AFT AVE. NAPLES, FL 34109			
î:TLF		☐ DELETE	4.1 TITLE		☐ Change	Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4 3 STREET ADDRESS				
CITY-S1-ZiP			4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	51 TITLE		☐ Change	Addition	
NAME			52 NAME				
STRELT ADDRESS			53 STREET ADDRESS				
CITY - ST - 7IP			5 4 CITY-ST-ZIP				
TITLE		☐ DELETE	61 TIFLE		☐ Change	Addition	
MAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
City - St - ZiP			6.4 CITY - ST - ZIP				
44				the die Destination of District Plant of Destination			

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:

JIFWAlliam A. HAll, III

Daytime Phone #