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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000030881 (4)

CONSTRUCTION MAINTENANCE SERVICES, INC.

## FILED May 16 1997 8:00am Secretary of State

Principal Place 2000 E. EDGEWI SUITE 106-B LAKELAND FL 3	000 DR.	Mailing Address  2000 E. EDGEWOOD DR. SUITE 106-B LAKELAND FL 33803-3653									
						3. Date In 04/21/	corporated or Q	, ·	ite of Last F <b>)9/1996</b>	Report	
21 5804		2a. Mailing Address	nckenr	idge	PKION	4. FEI Nur			A	pplied For ot Applicable	
Suite, Apt	#, etc	Suite, Apt. #, etc.			•	5. Certific	ate of Status De	sired 🔲	<b>—</b> — — —	Additional equired	
City & State 23 Tame	<b>3</b> *** .	City & State  28 Tam   20	FL			ſ	n Campaign Fina and Contribution			May Be to Fees	
Zip 336	Country	Zip 29 336/0	Court 30	try			rporation has lia Statutes	bility for intangible		s. 199.032,	
	9. Name and Address of Current	Registered Agent		91 100		10. Name	and Address of	New Registered	Agent		
MPGAIA' DOLIIA F					81 Name Mann, John L  82 Street Address (P.O. Box Number is Not Acceptable)						
2000 E. EDGEWOOD DR. Suite 108-B				<b>82</b> Stre	et Addres	ss (P.O. Box	Number is Not	Acceptable)			
	LAND FL 33803		į.	93							
			ļ.	B4 City	, ,		,		<b>65</b> Zip	Code	
	to the provisions of Sections 607.0502			1	Lake			FL.	33	801	
SIGNATURE	egistered agent, or both, in the State of m familiar with, and accept the obligation familiar with and accept the obligation familiar with a state of the obligation of the ob	Land title if applicable (NO				l when reinstating	)	DATE			
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STREET ADDRESS				EET AODRES	ss						
City-S1-7iP			6.4 CIT	Y-51-21P							
14. I de heret	by certify that the information supplied in indicated on this annual report or sy	with this filing does not qua	lify for the e	exemptio	n stated i	n Section 11 ny signature	9.07(3)(i), Florid shall have the s	a Statutes. I furthe ame legal effect as	certify that if made ur	t the nder oath; that	

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 if am an officer or director of the corporation of 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:

THE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

813-621-4653

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