## 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 # P94000040583 (4)

JAMES KELLY CONSTRUCTION, INC.

Principal Place of Business

RT 2 BOX 2079 STARKE FL 32091 Mailing Address

P.O. BOX 228 LAWTEY FL 32058

## FILED Apr 28 1998 8:00am Secretary of State



US	LAWIET PL 3208		DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualified 05/19/1994		
	ace of Business	2a. Mailing Address	LANGEYFI	4. FEI Number	Applied For	
21 كمك	reawille + li	26 10 BOX 308	39000	59-3243146	Not Applicable	
Sulte, Apt.	a Box 2019	Suite, Apt. #, etc.	(2028	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	" v~ [].	City & State	<u>~</u> ,	6. Election Campaign Financing	\$5.00 May Be	
	Country	28 STANKE	<del>}-</del> ]'	Trust Fund Contribution	Added to Fees	
<b>コククのし けいと かるへっこ</b>		1 2000	8, This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.			
24 5000	Name and Address of Current			Personal Property Tax due June 30. 10. Name and Address of New Registered	∠ Yes	
KELLY, JAMES R. 81 Name						
2710.7 RI ANDING RI VO						
	DLEBURG FL 32068		82 Street Addr	82 Street Address (P.O. Box Number is Not Acceptable)		
83						
ı						
			<b>84</b> City	FL	85 Zip Code	
11. Pursuant t	o the provisions of Sections 607.0502	and 607.1508. Florida Statutes	the above-named corn	poration submits this statement for the purpose of	Changing its registered	
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. Am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE	Stepaure, typed or present name, of requirement agend		Registered Agent signature requir	red when reinstating) DATE	30	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12	
TITLE	OP .	DELETE	1.1 TITLE		☐ Change ☐ Addition	
NAME	KELLY, JAMES R.		1.2 NAME			
STREET ADDRESS	RT 2 BOX 2079		1.3 STREET ADDRESS			
CITY-ST-ZIP	STARKE FL 32091		1.4 CITY-ST-ZIP			
TITLE		☐ DEL€1E	2.1 TITLF		Change Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP		T DI DI DE	2 4 CITY-ST-ZIP			
TITLE		L_ DELETE	3 1 1)TLE		☐ Change ☐ Addition	
NAME			3.2 NA 1E			
STREET ADDRESS			3.3 STEET ADDRESS			
CITY-ST-ZIP TITLE		DELFTE	3.4. C(17 - S1 - Z(P		Chones     Addition	
NAME		CJ PETE	4.1 111		Change    Addition	
STREET ADDRESS			4. 2 N E 4.3 ST 1 ADDRESS			
CITY-ST-ZIP					/ /	
TITLE	***************************************	DFLETE	4.4 C S1 - ZIP 5.1 TI		Change Addition	
NAME	<i>:</i>		5.2 N		S / // P - AUGMENT	
STREET ADDRESS			5.3 ST T ADDRESS	$\sim$	/ <i>Y/</i> _)\$	
CITY-ST-ZIP			5.4 Cl ST-7/P	1/0	100	
TITLE		DELETE	61 TII	60000250443	R Shange Addition	
NAME			6.2 NA	60000250443 -04/29/980101103	32	
STREET ADDRESS			6.3 STR ET ADDRESS	***150.00	- =	
CITY-ST-ZIP			6.4 CITY - S1 - ZIP			
14 I hereby ce	ertify that the information supplied with	this filing does not qualify for	the exemption stated in :	Section 119.07(3)(i), Florida Statutes. I further ce	rtify 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 panaged, or on an attachment with an address.						