## 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 # P94000041229 (3)

## **FILED** Apr 15 1997 8:00am Secretary of State

	NEWMAN CONSTRUCTION	ON COMP.	ANT INC	•									<b>#</b>
Principal Plac	ce of Business	Mai	iling Address					1400H4001 AT 1866 A	HOR DANK SOAN GOL	II ORIH DISKI	HOLD HEAL		111
527 NW 34 TERRACE 527 NW 34 TERRACE GAINESVILLE FL 32607-24					13								
								3. Date Incorporated 06/01/1994	or Qualified	1	te of Las	t Report	
2. Principal f	Place of Business	2a.	Mailing Addre	ess				4. FEI Number			14 191	Applied	For
		26						59-3243697				Not App	licable
Suite, Apt. #, etc.		27	Suite, Apt. #, etc.					5. Certificate of Status Desired S8.75 Addit Fee Requir				-	
City & Stat	to	28	City & State				-711.1	6. Election Campaig Trust Fund Contri	•			00 May	
Ζip	Country		Zip		Countr	у		8. This corporation i	as liability for	intangible			
]	25	29		3	30]			Florida Statutes		Yes [	] No		
	9. Name and Address of Cu	urrent Regist	ered Agent					10. Name and Addre	ss of New Re	gistered /	gent		
SA	LZMAN, ANTHONY J				81	Na Na	me						
MO	OODY, SALZMAN & ROBERTS D E. UNIVERSITY AVE., STE.				82	Str	eet Addre	Address (P.O. Box Number is Not Acceptable)					
	INESVILLE FL 32602-2759	••			83	3							
					84	4 Cit	у			FI	85	ip Code	
office or	reastored anont or both in the S	State of Florid	la. Such chanc	na Siaiules	s the abov	ve-nai	coroorati	on's board of directors	I hereby accor	ገተ የኮው ቋብነብ			
	to the provisions of Sections 607 registered agent, or both, in the Sam familiar with, and accept the case of period name of register.							on's board of directors.  ad when reinstating)	I hereby accer	ot the app	ointment	as regis	lerea
GNATURE.	Signature types are produced names of register		if applicable.	(NOTE:						DATE		ORS IN	12
IGNATURE	Stanting by a control transfer register  OFFICERS	nd agert and title it	if applicable.	(NOTE:	Registered A	gent sigi		ed when reinstating)		DATE		ORS IN	12
IGNATURE 2. Dié	OFFICERS  D NEWMAN, LINDA	nd agert and title it	if applicable.	(NOTE:	Registered A	gent sigi		ed when reinstating)		DATE	DIRECT	ORS IN	12
IGNATURE. <b>2.</b> Die Ame	OFFICERS  D NEWMAN, LINDA 527 NW 34 TERRACE	nd agert and title it	if applicable.	(NOTE:	Registered A	gent sig	nature (equire	ed when reinstating)		DATE	DIRECT	ORS IN	12
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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 oat. 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.