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Feb 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000041752 (4)

1. Corporation Name

PENINSULAR ENGINEERING & CONSTRUCTION COMPANY, I
NC.

Principal Place of Business

3011 DEMONTMOLLIN ROAD
PLANT CITY FL 33565

Mailing Address

3011 DEMONTMOLLIN ROAD
PLANT CITY FL 33565-5009



3. Date Incorporated or Qualified

05/31/1994

3a. Date of Last Report

02/16/1996

2. Principal Place of Business

21 204 E. TERRACE DR.

Suite, Apt. #, etc.

City & State

23 PLANT CITY FL

Zip

24 33565

Country

25 USA

2a. Mailing Address

26 204 E. TERRACE DR.

Suite, Apt. #, etc.

City & State

28 PLANT CITY FL

Zip

29 33565

Country

30 USA

4. FEI Number

65-0496512

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

SACCHI, RICHARD E
3011 DEMONTMOLLIN ROAD
PLANT CITY FL 33565

10. Name and Address of New Registered Agent

81 Name

RICHARD E. SACCHI

82 Street Address (P.O. Box Number Is Not Acceptable)

204 E. TERRACE DR.

83

84 City

PLANT CITY

FL

85 Zip Code

33565

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

Richard E. Sacchi

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME SACCHI, RICHARD E
STREET ADDRESS 3011 DEMONTMOLLIN ROAD
CITY-ST-ZIP PLANT CITY FL 33565

TITLE VP ☒ DELETE

NAME FEDUCCIA, MICHAEL G.
STREET ADDRESS 3011 DEMONT MOLLIN RD
CITY-ST-ZIP PLANT CITY FL 33565

TITLE S ☐ DELETE

NAME HITE, BRADLEY A.
STREET ADDRESS 3011 DEMONTMOLLIN ROAD
CITY-ST-ZIP PLANT CITY FL 33565

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition

1.2 NAME SACCHI, RICHARD E
1.3 STREET ADDRESS 204 E. TERRACE DR.
1.4 CITY-ST-ZIP PLANT CITY, FL 33565

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE VP, S ☒ Change ☐ Addition

3.2 NAME HITE, BRADLEY A
3.3 STREET ADDRESS 204 E. TERRACE DR.
3.4 CITY-ST-ZIP PLANT CITY, FL 33565

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-15-97

Date

813-754-7916

Daytime Phone #

CR2E034 (9/96)