FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 AUG -4 AM 10:09

DOCUMENT # **P94000044919 (6)**

1. Corporation Name
ADVANCED CONSTRUCTION OF NAVARRE, INC.

Principal Place of Business	Mailing Address
14 LUCKY LN MARY ESTHER FL 32569	14 LUCKY LN MARY ESTHER FL 32569

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/13/1994
3a. Date of Last Report:

2. Principal Place of Business
21 2010 PRADO ST
22 Suite, Apt. #, etc.
23 City & State: NAVARRE FL
24 Zip: 32566
25 Country:

2a. Mailing Address
26 2010 PRADO ST
27 Suite, Apt. #, etc.
28 City & State: NAVARRE FL
29 Zip: 32566
30 Country:

4. FEI Number: 59-3275614 ☐ 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

DAUGHERTY, ALEX K
14 LUCKY LN
MARY ESTHER FL 32569

10. Name and Address of New Registered Agent

81 Name: TONY W. POLAND
82 Street Address (P.O. Box Number is Not Acceptable): 2010 PRADO ST
83
84 City: NAVARRE FL 85 Zip Code: 32566

11. Pursuant to the provisions of Sections 607.0502 and 607.0505, 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: Tony Poland
TONY W POLAND (Typed or printed name and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	PD	☒ Change ☐ Addition
NAME	DAUGHERTY, ALEX K	12 NAME	POLAND, TONY W	
STREET ADDRESS	14 LUCKY LN	13 STREET ADDRESS	2010 PRADO ST	
CITY-ST-ZIP	MARY ESTHER FL 32569	14 CITY-ST-ZIP	NAVARRE FL 32566	
TITLE	VD	21 TITLE	VP	☒ Change ☐ Addition
NAME	DAUGHERTY, MAX	22 NAME	Gartner Tom	
STREET ADDRESS	302 SANTA ROSA BLVD APT 2	23 STREET ADDRESS	2010 Prado St	
CITY-ST-ZIP	FT WALTON BEACH FL 32547	24 CITY-ST-ZIP	Navarre FL 32566	
TITLE	STD	31 TITLE	STD	☒ Change ☐ Addition
NAME	POLAND, TONY W	32 NAME	PATTERSON, PATRICK	
STREET ADDRESS	6902 LIBERTY ST	33 STREET ADDRESS	2010 PRADO ST	
CITY-ST-ZIP	NAVARRE FL 32566	34 CITY-ST-ZIP	NAVARRE FL 32566	
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on the 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: Tony Poland 7-31-95 904-936-9057
SIGNATURE AND TYPED OR PRINTED NAME OF MAILING OFFICER OR DIRECTOR — Date — Daytime Phone #
TONY W. POLAND

0301407 CP