

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

FILED

Apr 28 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000055856 (6)

1. Corporation Name

STITZEL ENGINEERING & CONSTRUCTION, INC.



Principal Place of Business	Mailing Address
215 EAST BAY ST. 5 LAKELAND FL 33801	215 EAST BAY ST. 5 LAKELAND FL 33801

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21 215 East Bay St.	26 215 East Bay St.		
Suite, Apt. #, etc. 3	Suite, Apt. #, etc. 3		
22 City & State Lakeland, FL	27 City & State Lakeland, FL		
23 Zip 33801	28 Country USA	29 Zip 33801	30 Country USA

3. Date Incorporated or Qualified 07/27/1994	
4. FEI Number 59-3259834	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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No	

g. Name and Address of Current Registered Agent	
STITZEL, RAQUEL 7933 RIDGE POINTE DR W LAKELAND FL 33809	

10. Name and Address of New Registered Agent	
81 Name Stitzel, Raquel	
82 Street Address (P.O. Box Number is Not Acceptable)	5816 Lake Victoria Cove
83	
84 City Lakeland	FL 85 Zip Code 33813

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 _____
 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	STITZEL, ART
STREET ADDRESS	7933 RIDGE POINTE DR W
CITY-ST-ZIP	LAKELAND FL 33809
TITLE	S ☐ DELETE
NAME	STITZEL, RAQUEL
STREET ADDRESS	7933 RIDGE POINT DR W
CITY-ST-ZIP	LAKELAND FL 33809
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	☒ Change ☐ Addition
1.2 NAME	Art Stitzel
1.3 STREET ADDRESS	5816 Lake Victoria Cove
1.4 CITY-ST-ZIP	Lakeland, FL 33813
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	Raquel Stitzel
2.3 STREET ADDRESS	5816 Lake Victoria Cove
2.4 CITY-ST-ZIP	Lakeland, FL 33813
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
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 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 on an attachment with an address.

SIGNATURE: *Art Stitzel* *Raquel Stitzel* 4/21/98 (94) 1083427

CR2E034 (10/97)