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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 27, 1999 8:00 am Secretary of State

02-27-1999 90069 009 \*\*\*150.00

## **DOCUMENT #** P94000060777 1. Corporation Name

DEINARD & GULICK CONSTRUCTION COMPANY, INC.

Principal Place of Business

Mailing Address

3601 E OCEAN BLVD SUITE 003

3601 E OCEAN BLVD SUITE 003

31UAR! FL 34354	310ART FE 34334			DO NOT WRITE IN THIS SPACE					
				3. Date Incorporated or Qualifed					
				. 08/15/1994					
2. Principal Place of Business	2a. Mailing Address			4. FEI Number		Applied For			
27 100 W 5 12 5+	26 100 W 5	= <	54.	65-0521455		Not Applicable			
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 Additional Fee Required				
City & State 23 STUAR + FC	City & State  28 Stuart F	6		6. Election Campaign Financing Trust Fund Contribution		.00 May Be ded to Fees:			
Zip Country 24 34994 25 USA	Zip Cou 29 34994 30	intry US	5A	This corporation owes the current year Intagent Personal Property Tax.	ngible Yes	□No			
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent						
	_	81	Name						
GULICK, DAVID 93 SEWELLS POINT ROAD		82	82 Street Address (P.O. Box Number is Not Acceptable)						
STUART FL 34996		83	-						
		84	City	FL		Zip Code			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation sub 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: Re	gistered Agent signature r			ATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/C	HANGES TO OFFICE		
TITLE	Р	☐ DELETE	1.1 TITLE			Change	Addition
NAME	GULICK, DAVID		1.2 NAME		10 ( 0 )0		
STREET ADDRESS	93 SEWELLS POINT ROAD		1.3 STREET ADDRESS	9 LANTA	NACHNE		
CITY-ST-ZIP	STUART FL 34996		1.4 CITY-ST-ZIP	9 LANTA STUART	FC 349	96	
TITLE	ST	☐ DELETE	2.1 TIFLE			Change (	Addition
NAME	GULICK, ELIZABETH		2.2 NAME	0 ( 10 )	10 / ANG		
STREET ADDRESS	93 SEWELLS POINT ROAD		2.3 STREET ADDRESS	Q LANTA STVATT VP MCAULEY, 1704 NW BI STUART, F	MA CHIVE		
CITY-ST-ZIP	STUART FL 34996		2.4 CITY-ST-ZIP	STVATE	, FL 34	996	
TITLE	SOCIO SI SICIO SOCIO SOCIO SOCIO SOCIO SOCIO SOCIO SOCIO SICIO SOCIO SICIO SIN	☐ DELETE	3.1 TITLE	NP	TACA .	☐ Change	Addition
NAME	100 CO		32 NAME	MECAULEY,	140.		
STREET ADDRESS			3.3 STREET ADDRESS	1704 NW BI	ritt Rd		
CITY-ST-ZIP			34. CITY-ST-ZIP	Stuart F	L 34994		
TITLE		DELETE	4.1 TITLE	,		☐ Change	Addition
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS	•			
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE			☐ Change	☐ Addition
NAME		i	6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP	1 - 0 - 1 - 140 07(2)(3)	5) 1 6 4 - 15 - 1	1/E . AL . A . L	ttio-

I mereby certify that the information supplied with this fling 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 ampting type 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 trusted embowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, or order adaptment in an adaptment, with all other like empowered.

SIGNATURE: