

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR 12 PM 10:49

DOCUMENT # P94000071626 (3)

1. Corporation Name

MCELVEEN BUILDERS, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business
**607 S. ALEXANDER STREET
PLANT CITY FL 33566**

Mailing Address
**607 S. ALEXANDER STREET
PLANT CITY FL 33566**

3. Date Incorporated or Qualified
09/29/1994

3a. Date of Last Report

2. Principal Place of Business
21 607 ALEXANDER ST, SUITE 211

2a. Mailing Address
26 117 W. ALEXANDER ST

4. FEI Number
59-3278839

Applied For
Not Applicable

Suite, Apt. #, etc.
22 SUITE 211

Suite, Apt. #, etc.
27 SUITE 221

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

City & State
23 PLANT CITY, FL.

City & State
28 PLANT CITY, FL.

6. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

Zip
24 33566

Country
25 HILLS.

Zip
29 33566

Country
30 HILLS.

8. This corporation has liability for intangible tax under C. 190.002, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MCELVEEN, PHILIP P
607 S. ALEXANDER STREET
PLANT CITY FL 33566**

81 Name

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

83

84 City

FL

85 Zip Code

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 reconstituting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
D
NAME
MCELVEEN, PHILIP P
STREET ADDRESS
607 S. ALEXANDER STREET
CITY ST ZIP
PLANT CITY FL 33566

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 of this filing, or on an attachment with an address.

SIGNATURE:

[Signature]

PRINT NAME AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(813) 754-7855