

**mp**

**PLEASE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1997**



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

**FILED**  
**May 01 1997 8:00am**  
**Secretary of State**

**DOCUMENT # P94000089933 (3)**

**GARCIA CONSTRUCTION INTERNATIONAL, INC.**



Principal Place of Business

**621 PARK AVE.  
TITUSVILLE FL 32706**

Mailing Address

**621 PARK AVE.  
TITUSVILLE FL 32706-3855**

3. Date Incorporated or Qualified

**12/12/1994**

3a. Date of Last Report

**05/01/1996**

2. Principal Place of Business

**21 Suite, Apt. #, etc.**

**22 City & State**

**23 Zip**

**25 Country**

2a. Mailing Address

**26 Suite, Apt. #, etc.**

**27 City & State**

**28 Zip**

**30 Country**

4. FEI Number

**59-3307919**

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

**STADLER, RICHARD E  
509 PALM AVE.  
TITUSVILLE FL 32706**

**81 Name**

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

**83**

**84 City**

**FL**

**85 Zip Code**

10. Name and Address of New Registered Agent

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

**D** ☐ DELETE  
**GARCIA, PEDRO M**  
**4314 COBBLESTONE COURT**  
**ORLANDO FL 32810**

**S/T** ☐ DELETE  
**William C. Butcher**  
**4695 Cinema Street**  
**Cocoa, FL 32927**

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**11 TITLE** ☒ Change ☐ Addition  
**12 NAME**  
**13 STREET ADDRESS** **818 Spring Island Way**  
**14 CITY - ST - ZIP** **Orlando, FL 32838**

**21 TITLE** ☐ Change ☒ Addition  
**22 NAME** **S/T**  
**23 STREET ADDRESS** **William C. Butcher**  
**24 CITY - ST - ZIP** **4695 Cinema Street**  
**Cocoa, FL 32927**

**31 TITLE** ☐ Change ☐ Addition  
**32 NAME**  
**33 STREET ADDRESS**  
**34 CITY - ST - ZIP**

**41 TITLE** ☐ Change ☐ Addition  
**42 NAME**  
**43 STREET ADDRESS**  
**44 CITY - ST - ZIP**

**51 TITLE** ☐ Change ☐ Addition  
**52 NAME**  
**53 STREET ADDRESS**  
**54 CITY - ST - ZIP**

**61 TITLE** ☐ Change ☐ Addition  
**62 NAME**  
**63 STREET ADDRESS**  
**64 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 on an attachment with an address.

SIGNATURE: **WILLIAM C. BUTCHER**

407/264/4687

CR2E034 (9/96)