

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

FILED  
Apr 17 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P95000000989 (0)

1. Corporation Name

F.L. SULLIVAN CONSTRUCTION COMPANY, INC.



Principal Place of Business

6750 LIBERTY ST  
NAVARRE FL 32566

Mailing Address

6750 LIBERTY ST  
NAVARRE FL 32566

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/03/1995

4. FEI Number

59-3286400

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

2. Principal Place of Business

21 Suite, Apt. #, etc.  
22 6920 SEA CRAB CR.  
23 City & State  
NAVARRE, FLORIDA  
24 Zip  
32566  
25 Country  
SANTAROSA

2a. Mailing Address

26 Suite, Apt. #, etc.  
27 6920 SEA CRAB CR.  
28 City & State  
NAVARRE, FLORIDA  
29 Zip  
32566  
30 Country  
SANTAROSA

9. Name and Address of Current Registered Agent

SULLIVAN, FRANK L  
6750 LIBERTY ST  
NAVARRE FL 32566

10. Name and Address of New Registered Agent

81 Name  
Frank L. Sullivan  
82 Street Address (P.O. Box Number is Not Acceptable)  
6920 SEA CRAB CR.  
83  
84 City  
NAVARRE FL  
85 Zip Code  
32566

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 of registered agent or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/13/98  
DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	SULLIVAN, FRANK L	
STREET ADDRESS	6750 LIBERTY ST	
CITY-ST-ZIP	NAVARRE FL 32566	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	SULLIVAN, DAWN M. H	
STREET ADDRESS	6750 LIBERTY ST	
CITY-ST-ZIP	NAVARRE FL 32566	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Frank L. Sullivan	
1.3 STREET ADDRESS	6920 SEA CRAB CR.	
1.4 CITY-ST-ZIP	NAVARRE, FL 32566	
2.1 TITLE	VICE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	DAWN M.H. SULLIVAN	
2.3 STREET ADDRESS	6920 SEA CRAB CR.	
2.4 CITY-ST-ZIP	NAVARRE, FL 32566	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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

4/13/98 892-921-9122

CR2E034 (10/97)