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

**PROFIT** CORPORATION ANNUAL REPORT



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

1996

appears in Block 12 or Block 13 if changed, or on an attachment with an address

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytin e Prione #

SIGNATURE:

P95000012665 (2) **DOCUMENT #** WATERSIDE CONSTRUCTION, INC. Mailing Address Principal Place of Business 5910 TAYLOR ROAD 5910 TAYLOR ROAD SUITE 104 SUITE 104 NAPLES FL 33942 NAPLES FL 33942 3. Date Incorporated or Qualified 3a. Date of Last Report 02/14/1995 4. FEI Number 2a. Mailing Address Applied For 2. Principal Place of Business Not Applicable 26 65-0643542 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation has liability for intangible tax under s 199.032, Country Zιο Florida Statutes Yes No 29 30 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MAC'KIE, PAMELA S Street Address (P.O. Box Number is Not Acceptable) 5551 RIDGEWOOD DRIVE 83 SUITE 201 NAPLES FL 33963 Zip Code 84 City 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE ☐ Change ☐ Addition TILLE DAY, HA CR2E034 1.2 NAME NAME 5910 TAYLOR RD., STE. 104 1.3 STREET ADDRESS STREET ADDRESS NAPLES FL 33942 1.4 CITY - \$1 - ZIP CITY-ST-ZIP Addition DELETE ☐ Change TITLE 2 1 31TLF TAYLOR, BILL 2.2 NAME NAME 5910 TAYLOR RD., STE. 104 2.3 STREET ADDRESS STREET ACORESS NAPLES FL 33942 24 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition XX DELETE TITLE 3 1 THILE DAY, PHILLIP NAME 5910 TAYLOR RD., STE. 104 3.3 STREET ADDRESS STREET ADDRESS NAPLES FL 33942 3.4 CITY - \$1 - ZIP CITY - ST - ZIP DELETE ☐ Change Addition 4. 1 TITLE TITLE NAM: 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CiTY-S1-ZiP 4.4 CITY - ST - ZIP Change DELETE Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STHEEL ADDRESS 5.4 CiTY-ST-ZIP CHTY - \$1 - ZIP Addition [ ] Change DELETE 6 1 THILE TITLE NAME 62 NAME SIREE1 ADDRESS **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