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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 27, 1999 8:00am

**Secretary of State** 

01-27-1999 90032 043 \*\*\*150.00

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # **P95000026269**1. Corporation Name

SIGNATURE:

NORTHWEST FLORIDA CONCRETE PUMPING, INC.

Principal Place	e of Business	Mailing Ad	dress						
55 SOUTH "B"		P.O. BOX 1					·		
PENSACOLA FL	L 32501	PENSACOLA	A FL 32523				DO NOT WRITE IN THIS	SDACE -	
		US					3. Date Incorporated or Qualifed	SPACE .	
							03/29/1995	4.	:
2. Principal P	Place of Business	2a. Mailing	Address				4. FEI Number		pplied For
21		26				·	59-3322037		ot Applicable
Suite, Apt.	#, etc.	Suite, A	Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Fee Re	Additional equired
City & Stat	te	City &	State				6. Election Campaign Financing Trust Fund Contribution	\$5.00	May Be to Fees
Zip .	Country	Zip		Col	untry		This corporation owes the current year Interest.		10 1 003
<b>─</b> ¬ `	25	29		30	y		Personal Property Tax.	Yes	□No
24	9. Name and Address of Current		gent	301	1		10. Name and Address of New Registered		
	Hame and Address of Content		4-1-1		81	Name		<del>-</del>	
SULI	LIVAN, PATRICK	The November 1 of					· · · · · · · · · · · · · · · · · · ·		
55 S	SOUTH "B" STREET	精神的 机流流	ţ,··		82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
PEN	SACOLA FL 32501				83		100 mm (100 mm) (100		13 53 88
									<b>引度基层的</b>
					84	City	FL	85 Zip	Code
office or o	registered agent, or both, in the State of am familiar with, and accept the obligation	of Florida, Such ions of, Section	change was a 607.0505, Fid	authorize	d by th	-named corp he corporation	poration submits this statement for the purpose of on's board of directors. I hereby accept the appoin	ntment as re	egistered
		and title if applicable	NOT	F: Registere	d Agent	signature require	ed when reinstating) DATE		
12.			:_	E: Registere 13.		signature require	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	DRS IN 12
12.	OFFICERS AND		:_	13.		signature require	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	DRS IN 12
TITLE .	OFFICERS AND			13.		signature require			
TITLE .	OFFICERS AND D SULLIVAN, PATRICK			13. 1.1 T 1.2 N	TITLE IAME	signature require	ADDITIONS/CHANGES TO OFFICERS AN		
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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 not 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 empoyered 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, with a other like empowered.