

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000027560 (8)

1. Corporation Name

FOLEY-WEBB, INC.



Principal Place of Business

6980 ULMERTON ROAD STE. 5A
LARGO FL 34641

Mailing Address

6980 ULMERTON ROAD STE. 5A
LARGO FL 34641

3. Date Incorporated or Qualified
04/04/1995

3a. Date of Last Report
N/A

2. Principal Place of Business

21 782 23rd Avenue N.

2a. Mailing Address

26 782 23rd Avenue N.

4. FEI Number

59-3308513

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

City & State

23 St. Petersburg, FL

City & State

27 St. Petersburg, FL

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24 Zip
33704

Country

29 Zip
33704

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LETTELEIR, MARK P
6980 ULMERTON ROAD STE. 5A
LARGO FL 34641

81 Name

Mark LETTELEIR

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

782 23rd Avenue N.

83

84 City

St. Petersburg FL

85 Zip Code

33704

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

3-11-96

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME LETTELEIR, JOSEPH T
STREET ADDRESS 944 39TH AVENUE NORTH
CITY-ST-ZIP ST. PETERSBURG FL 33703

TITLE D ☐ DELETE

NAME LETTELEIR, REBECCA B
STREET ADDRESS 944 39TH AVENUE NORTH
CITY-ST-ZIP ST. PETERSBURG FL 33703

TITLE D ☐ DELETE

NAME LETTELEIR, AMY E
STREET ADDRESS 944 39TH AVENUE NORTH
CITY-ST-ZIP ST. PETERSBURG FL 33703

TITLE D ☐ DELETE

NAME LETTELEIR, MARK P
STREET ADDRESS 6980 ULMERTON ROAD STE 5-A
CITY-ST-ZIP LARGO FL 34641

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ☒ Change: ☐ Addition

1.2 NAME Lettelair, Mark P
1.3 STREET ADDRESS 782 23rd Avenue N.
1.4 CITY-ST-ZIP St. Petersburg, FL 33704

2.1 TITLE Vice-President ☐ Change: ☒ Addition

2.2 NAME Lettelair, Tiffany T.
2.3 STREET ADDRESS 782 23rd Avenue N.
2.4 CITY-ST-ZIP St. Petersburg, FL 33704

3.1 TITLE ☐ Change: ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change: ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change: ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-11-96 (813) 480-3399

CR2E034 (12/95)