## May 03, 1999 8:00 am Secretary of State

05-03-1999 90005 003 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000046386

JERNIGAN BROTHERS CONTRACTING, INC.

oem (o)	·							
Principal Place	of Business	Mailing Address				,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
1318 OAK HILL STREET 1318 OAK HILL STREET SEFFNER FL 33584 SEFFNER FL 33584								
					DO NOT V	VRITE IN THIS	SPACE	
					<ol> <li>Date Incorporated or Quality</li> <li>06/12/1995</li> </ol>	ied		
- Di	of Divisions	2a. Mailing Address	<del></del>		4. FEI Number		Apr	olied For
— `	ace of Business	H			59-3321072		<u> </u>	Applicable
21 Suito Ant	# ato	Suite, Apt. #, etc.	-		-		\$8.75 A	
Suite, Apt.	#, etc.	27			5. Certifcate of Status Desired	å □	Fee Rec	
City & Stat	•	City & State			6. Election Campaign Financi		\$5.00 (	May Be
<b>—</b>		28			Trust Fund Contribution	'' <sup>9</sup> 🗀	Added to	
Zip	Country	Zip	Country		8. This corporation owes the	current vear Int	angible	
24	25	29 3	_ `		Personal Property Tax.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		□No
24	9. Name and Address of Current		<u>,                                     </u>		10. Name and Address of Ne	w Registered	Agent	
	3		81	Name	)			
TRU	SSELL, WILLIAM H JR		-	21	Address (D.O. Bay Number in Not Acc			
1318	OAK HILL STREET		82	Street	t Address (P.O. Box Number is Not Acc	shrania)		ļ
SEF	FNER FL 33584		83					
						-		
			84	City		FL	85 Zip C	ode
SIGNATURE	Signature, typed or printed name of registered agen OFFICERS AN	D DIRECTORS	egistered Ager	t signature	a required when reinstating) ADDITIONS/CHANGES TO	OFFICERS AN		
TITLE	D	☐ DELETE	1.1 TITLE				Change	Addition '
NAME	TRUSSELL, WILLIAM H JR		1.2 NAME					
STREET ADDRESS	1318 OAK HILL STREET		1.3 STREET	ADDRESS	3			
CITY-ST-ZIP	SEFFNER FL 33584		1.4 CITY-S	7-ZIP				C Addition
TITLE	STD	☐ DELETE	2.1 TITLE				☐ Change	Addition
NAME	TRUSSELL, TAMI		2.2 NAME		`			
STREET ADDRESS		: •••	2.3 STREE	ADDRESS	3	•	•	
CITY-ST-ZIP	SEFFNER FL 33584		2.4 CITY-S	T-ZIP		-		- Addition
TITLE	VD .	☐ DELETE	3.1 TITLE		1		Change	☐ Addition
NAME	WRIGHT, JERRI		3.2 NAME				√ 1 1 J	
STREET ADDRESS	3505 BEECHWOOD BLVD		3.3 STREE	FADDRESS	s		í	
CITY-ST-ZIP	TAMPA FL 33619		3.4. CITY-S	T-ZIP	<del> </del>		Change	Addition
TITLE		☐ DELETE	4.1 TITLE				Change	☐ Addition
NAME			4. 2 NAME		·			
STREET ADDRESS			4.3 STREE		5			
CITY-ST-ZIP			4.4 CITY-S	T-ZIP	<del> </del>		Chanca	☐ Addition
TITLE	•	☐ DELETÉ	5.1 TITLE				☐ Change	☐ Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE		°[			
CITY-ST-ZIP		□ octor	5.4 CITY-S 6.1 TITLE	T-ZIP			Change	Addition
TITLE		☐ DELETE	1				□ cuanâe	- Hadrison
NAME			6.2 NAME	T A DODDEN				
PERCET APPRECE	i '		6.3 STREE	I ALUKESS	ا د			

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, with all other like empowered.

6.4 CITY-ST-ZIP

**SIGNATURE:** 2

STREET ADDRESS

813681-7954