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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000054676 (8)

CUNNINGHAM CONCRETE FINISHING CO., INC.

Principal Place	e of Business		ailing Address							
Principal Place of Business Mailing Address  606 MOCKINGBIRD LANE 606 MOCKINGBIRD LANE ALTAMONTE SPRINGS FL 32714 ALTAMONTE SPRINGS FL 32714-7408							A No. 12 (18) (18)	***	THE !!!	
					408					
I							3. Date Incorporated or Qualific	d 3a. (	Date of Last F	₹eport
<u></u>							07/14/1995	0	5/01/1996	
2. Principal Pi	lace of Business	· ·	Mailing Address				4. FEI Number		<del></del>	pplied for
21		26					59-3242271			ot Applicable
Suite, Apt.		27				5. Certificate of Status Desired			Additional equired	
City & State	е	28	City & State				Election Campaign Financing     Trust Fund Contribution			May Be to Fees
Zip	Country		7(p	Cou	iritry	y	8. This corporation has liability f	or intancib		
24	25	29		30			Florida Statutes		<b>∑</b> No	
	9. Name and Address of Cur	ent Regis	tered Agent			,	10. Name and Address of New	Registered	Agent	
CUN	NNINGHAM, MICHAEL E				81	Name				
606 MOCKINGBIRD LANE					82	Street Add	ress (P.O. Box Number is Not Acceptable)			
ALT	AMONTE SPRINGS FL 32714				83					
						<u> </u>				
					84	City		Œ	<b>85</b>    Zip	Code
11. Pursuant to office or reagent. La	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the ob-	502 and € ste of Flori ligations c	07.1508, Florida Stat da. Such change was f, Section 607.0505, I	utes, the a s authorize Florida Sta	boy d b	e-named cor y the corpora s.	poration submits this statement for th tion's board of directors. I hereby ac-	e purpose cept the ap	of changing i pointment as	Is registered registered
SIGNATURE										,
12.	Signature, typed or printed name of registered OFFICERS A			011 Register.	ď Ag	ont signature requ	lrod when reinstating) ADDITIONS/CHANGES TO OF	DATE	ID DIBECTOR	28 IM 12
TITLE	P\$	MIN DITT	DELFTE	1.1.1	111		ADDITIONS/CHANGES TO OF	TICENS AN	Change	Addition
NAME	CUNNINGHAM, MICHAEL			1.2 N		}			enange	La riodino.
STREET ADDRESS	606 MOCKINGBIRD LANE					I ADDRESS				
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	2714				ST-ZIP				
TITLE	VPT	21 14	DELETE	211		21-711			Change	Addition
NAME	CUNNINGHAM, SHELIA			22 N		1				
STREET ADDRESS	606 MOCKINGBIRD LANE					I ADDRESS				
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	32714		4		SI-ZIP				
TUTE			DELETE	311					Change	☐ Addition
NAME				3.2 N	AME	}				
STREET ADDRESS				338	HEET	ADDRESS				
CITY-SI-ZIP				3.4.0	ITY -	S1-7(P				
TITLE			DLLETE	4.1 Ti	11 F				Change	Addition
NAME				4.21	IAME	-				
STREET ADDRESS				4,3 \$	TRÉE	T ADDRESS				
CITY-ST-ZIP				4.4.0	ny-s	ST-ZIP				
TITLE			DELETE	5.1 I	ΙLE				Change	Addition
NAME				5.2 N	AME	]				
STREET ADDRESS				538	TREF.	ADDRESS				
CITY-ST-ZIP				540	11 Y - S	ST - 7/P			<u></u>	
TALE			D DELFTE	6.1 T	116				Change	roilitbA
NAME				62 N	AME	}				
STREET ADDRESS				635	REET	LADDRESS				

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fforida 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, Fforida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

& wilder our himself

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1.30.96

**FILED** 

May 15 1997 8:00am

Secretary of State

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