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

PROFIT CORPORATION ANNUAL REPORT

1999

DOCUMENT #

1. Corporation Name



P95000063399

FLORIDA DEPARTMENT OF STATE

Katherine Harris

DIVISION OF CORPORATIONS

Secretary of State

Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90153 034 ***150.00

BIDDING	ER CONSTRUCTION, INC.		•									
Principal Place of Business		Mailing Address					† 1981 (1885 178 1858) B. B. L. B. B. L. B.		III PR INGS III	10 16118 1811 1881		
1501 FIRST STREET & NASSAU SOUTHPORT FL 32409		P.O. BOX 8383 SOUTHPORT FL 32409					DO NOT WRITE II	N THIS :	SPACE			
								Date Incorporated or Qualifed 08/14/1995				
2. Principal Pl	ace of Business	2a. Mailing Address						FEI Number			Applied For	1
21		26 7 7 5					59-3332811		1	lot Applicable	7	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\neg			, ,	\$8.75	Additional	7	
22		27				٥. 	Certificate of Status Desired	,	Fee F	Required: .		
City & State		City & State				6.	Election Campaign Financing	 1	\$5.00	May Be	Ì	
23							Trust Fund Contribution	J	Added	to Fees		
Zip	Country	Zip	Cou	intry			8.	This corporation owes the current	year Inta	ıngible	_	1
24	25	29	30					Personal Property Tax.		Yes	□No	
	9. Name and Address of Current	Registered Agent		Ĺ.,			10.	Name and Address of New Regi	stered A	Agent		4
				81	Name							
BIDD			82 Street Addre				O. Box Number is Not Acceptable)			7	
	FIRST STREET											
SOU	THPORT FL 32409			83								ł
		•		84	City					85 Zip	Code	┪
					•				FL			
office or re agent. I ar	to the provisions of Sections 607.0502 agistered agent, or both, in the State on a familiar with, and accept the obligati	of Florida. Such change was :	authorize	d bv '	the corpora	orpora ation's	ation s boa	submits this statement for the purp ard of directors. I hereby accept th	e appoin	tment as i	registered	
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable. (NOT	E: Registere	d Agen	t signature req	juired wi	hen re	instating)	DATE			_] ;
12.	OFFICERS AND	DIRECTORS	13.				Α	DDITIONS/CHANGES TO OFFICE	ERS AN			_ :
TITLE	P □ DELETE			ITLE						Change	Additio	n ;
NAME	BIDDINGER, JOHN J			1.2 NAME								;
STREET ADDRESS 1501 NASSAU STREET, P.O. B		DX 8383			1.3 STREET ADDRESS				•			
CITY-ST-ZIP	SOUTHPORT FL 32409			1.4 CITY-\$T-ZIP								4
TITLE	VP	☐ DELETE	2.1 T	TLE						☐ Change	Additio	n '
NAME	BIDDINGER, JOHN D		2.2 N	2.2 NAME								
STREET ADDRESS	1507 NASSAU STREET	2.3 \$		2.3 STREET ADDRESS								ļ
CITY: ST-ZIP SOUTHPORT FL 32409					2.4 CITY-ST-ZIP=			<u> 19 - 19 19 19 19 19 19 19 19 19 19 19 19 19 </u>			· ·	1
TITLE	ST	☐ DELETE	3.1 T	ITLE	Ī		_			Change	e	n
NAME	BIDDINGER, VINA		3.2 N	AME	}							
STREET ADDRESS 1501 NASSAU STREET, P.O. BOX 8383			3.3 S	3.3 STREET ADDRESS								
CITY-ST-ZIP	SOUTHPORT FL 32409		3.4.0	CITY-S	T-ZIP							4
TITLE		☐ DELETE	4.1 T	ITLE	- 1					Change	e	n
NAME			4.21	NAME								
STREET ADDRESS			4.3 STREE		ADDRESS							
CITY-ST-ZIP			4.4 0	ITY-S	r-ZiP							_
TITLE		□ DELETE	5.1 T)					Change	e 🗌 Additio	n)
NAME				IAME								
STREET ADDRESS			ı		ADDRESS							-
CITY-ST-ZIP				ITY-S	1-ZIP							
TITLE		☐ DELETE	6.1 T							Change	e	n
NAME				IAME								- (
STREET ADDRESS			1	6.3 STREET ADDRESS								1
CITY-ST-ZIP			6.4 C	ITY-\$	r-ZIP							[

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 is changes, or on an attachment with an address, with all other like empowered.

SIGNATURE: