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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000068721 (6)

STURGIS CONSTRUCTION CORP.

Principal Place of Business Mailing Address

FILED May 08 1998 8:00am Secretary of State



10206 TRANO ODESSA FL 3		10206 TRANQUIL LN ODESSA FL 33556			DO NOT WRITE IN THIS S 3. Date Incorporated or Qualified 09/01/1995	SPACE		
2. Principal P	lace of Business	2a. Mailing Address	ng Address		4. FEI Number		Applied For	
21		26			65-0608796		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Certificate of Status Desired Section			
City & State	e	City & State			Election Campaign Financing Trust Fund Contribution		00 May Be led to Fees	
Zip 24	Country 25	Ζιρ 29	Countr 30	у	This corporation owes or has paid the cur Personal Property Tax due June 30.	rent yea Yes	r Intengible	
	9, Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered	Agent		
GLI	UCK, THOMAS		81	Name				
10206 TRANQUIL LANE ODES\$A FL 33556			82	Street Add	dress (P.O. Box Number is Not Acceptable)			
	LOOK I'L OOOO		83	1				
			84	City	FL	85	Zip Code	
office or r	to the provisions of Sections 607 0502 egistered agent, or both, in the State in familiar with, and accept the obligations between the state of the section	of Florida, Such change wa dious of, Section 607,0505,	is authorized b Florida Statute	y the corpora is.	poration submits this statement for the purpose of ation's board of directors. I hereby accept the app	changir ointmen	ng its registered t as registered	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIREC	TORS IN 12	
TITLE NAME STREET ADDRESS	D GLUCK, THOMAS 10206 TRANQUIL LN	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREE	T ADDRESS		☐ Char	ige Addition	
CITY-ST-ZIP	ODESSA FL 33556	- DELETE	1.4 CITY -	ST-ZIP		1 0	[7] (449)	
TITLE NAME STREET ADDRESS	OP GLUCK, THOMAS 10208 TRANQUIL LANE	DELETE	2.1 TITLE 2.2 NAME 2.3 STREE	T ADDRESS		☐ Char	ige 🔲 Addition	
CITY-ST-ZIP	ODESSA FL		2. 4 CITY-		•			
TITLE	ODCOON 1C	☐ DELETE	3.1 TITLE	01 211		Char	ige Addition	
NAME			3.2 NAME	1				
STREET ADDRESS			3.3 STREE	T ADDRESS				
CITY-ST-ZIP			3.4. CITY-	ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE			☐ Char	nge 🔲 Addition	
NAME			4. 2 NAME	- 1				
STREET ADDRESS			4.3 STREE 4.4 City-	T ADDRESS				
CITY-ST-ZIP TITLE		☐ DELE te	5.1 TITLE	01-41r		Char	ge Addition	
NAME			5.2 NAME	ŀ				
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP			5.4 CITY-					
TITLE		☐ DELETE	6.1 TITLE			Chan	ige Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	T ADDRESS				
CITY-ST-ZIP			6.4 CITY-	ST-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 if changed, or on an attraction with an additional statutes.