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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P95000097246 (9)

BOBBY BOYS CONSTRUCTION INC.

Principal Place of Business

Mailing Address

FILED May 05 1998 8:00am Secretary of State



	9 NW 18TH PLACE 4719 NW 18TH PLACE Nesville Fl. 32605 Gainesville Fl. 32605					
					DO NOT WRITE IN TH	HIS SPACE
					 Date Incorporated or Qualified 12/20/1995 	
2. Principal Pl	ace of Business	2e. Mailing Address			4. FEI Number	Applied For
ন্ন 45৩१	NW 23RD AVE	26			59-3352003	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.				\$8.75 Additional
22 SUITE	= 3	27	···		5. Certificate of Status Desired	Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23 GAING		28			Trust Fund Contribution	Added to Fees
Zip	Country	Ζιρ	Country	/	8. This corporation owes or has paid the	_ ′ _ ′ _ ′
24 326		29	30		Personal Property Tax due June 30.	Yes XNo
	Name and Address of Currer	nt Registered Agent	81	Name	10. Name and Address of New Registe	red Agent
	VIS, CAIN		[5]	Marile		
	9 NW 18TH PLACE		82	Street Ac	ddress (P.O. Box Number is Not Acceptable)	
GA	INESVILLE FL 32605		83	-	The state of the s	
			84	City	1	FI 85 Zip Code
11. Pursuani t	to the provisions of Sections 607.056	02 and 607.1508. Florida Statu	tes, the abov	e-named co	orporation submits this statement for the purpo-	se of changing its registered
office or re	egistered agent, or both, in the State in familiar with, and accept the oblig	of Florida. Such change was	authorized b	v the corpo	ration's board of directors. I hereby accept the	appointment as registered
	in laminar with, and accopt the oong	ations of, addition dov.0000, ri	ionoa otatute	3.		
SIGNATURE	Signature, typed or printed name of registere Lag	ent and title if apparable (NO	TL: Registered Ag	ent signature re	quired when reinstating) DA	TE.
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	DPT	☐ DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	DAVIS, CAIN		1.2 NAME			
STREET ADDRESS	4719 NW 18TH PLACE		1.3 STREE	T ADDRESS	•	
CITY-ST-ZIP	GAINESVILLE FL		1.4 CiTY-	ST - ZIP		
TITLE	DVS	☐ DELETE	2.1 TITLE			Change Addition
NAME	DAVIS, SHIRLEY B		2 2 NAME			
STREET ADDRESS	4719 NW 18TH PLACE		2.3 STREE	1 ADDRESS		
CITY-ST-ZIP	GAINESVILLE FL		2. 4 CITY -	ST-ZIP		
TITLE		☐ DELETE	3 1 THILE			Change Addition
NAME			3 2 NAME			
STREET ADDRESS			3 3 STREE	T ADDRESS		
CITY-ST-ZIP			3.4. CITY-	ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAMÉ		<u>.</u>	
STREET ADDRESS			4.3 STREE	T ADDRESS		
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		
TITLE		☐ DELETE	51 TITLE			Change Addition
NAME			5 2 NAME			
STREET ADDRESS			5.3 STREE	T ADDRESS		
CITY-ST-ZIP			5.4 C(TY-)	ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE			Change 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it changed or on an attachment with an address.