## 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 # P9600001658 (9)

CONSTRUCTION MARKETING AND MANAGEMENT, INC.

Principal Place of Business

Mailing Address

## FILED Jan 23 1998 8:00am Secretary of State



4002 - 23RD AVENUE WEST BRADENTON FL 34205		4002 - 23RD AVENUE WEST Bradenton FL 34205			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	$\neg$
					01/05/1996	-
· ·	lace of Business	2a. Mailing Address			4. FEI Number Applied For	$\dashv$
21 Suite Ant		26			65-0643363 Not Applicate	ole
I Suite, Apt. W. etc.		Suite, Apt. #, etc.			SR 75 Additional	Ħ
22		27			5. Certificate of Status Desired Fee Required	ŀ
I City & State	е	City & State			6. Election Campaign Financing \$5.00 May Be	コ
23		28			Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country		8. This corporation owes or has paid the current year Intangible	$\neg$
24	25	29 :	30		Personal Property Tax due June 30. Yes No	
ļ	g. Name and Address of Curr	rent Registered Agent			10. Name and Address of New Registered Agent	<b>二</b>
	Mond, James L		81	Name		
4002 23RD AVE. WEST			82	Street	Address (P.O. Box Number is Not Acceptable)	$\dashv$
BR/	ADENTON FL 34205					
1			83			
			84	City	FL 85 Zip Code	$\dashv$
l ource of the	egistered agent, or both, in the Sta	ite of Florida. Such change was au	uthorized by	the corr	d corporation submits this statement for the purpose of changing its registere poration's board of directors. I hereby accept the appointment as registered	a
ayen, ra	m temiliar with, and accept the obl	igations of, Section 607.0505, Flor	ida Statutes			
SIGNATURE	Signature, typed or printed name of registered a	accost and title if applicable (NOTE:	Registered Age	nt signature	e required when reinstating) DATE	-
12.		ND DIRECTORS	13.	K algricule	ADDITIONS/CHANGES TO OFFICERS AND DIDECTORS IN 12	<b>⊣</b> !
TITLE	D	DELETE	1.1 TITLE		PRESIDENT Michanne Addition	<u>.</u> ⊢3
NAME	OSMOND, JAMES M		1.2 NAME		T MICHAEL OSMOND	<u> </u>
STREET ADDRESS	-108 WALLOBERG CT.		1.3 STREET	ADDRESS	1104 92 NO STREET NW	8
CITY-ST-ZIP	CARY NO 27511-		1.4 CITY - ST		BRADENTON FIORIDA 34209	
TITLE	D	☐ DELETE	2.1 TITLE		Change Addition	<u>,</u> [₹
NAME	OSMOND, JAMES L		2.2 NAME			- {
STREET ADDRESS	4002 - 23RD AVENUE WEST		2.3 STREET ADDRESS			
CITY-ST-ZIP	BRADENTON FL 34205		2.4 CITY-ST-ZIP			
TITLE			3.1 TITLE	_	☐ Change ☐ Additio	ın
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET	ODRESS		
CITY-ST-ZIP			3.4. CITY - S1	r-zip		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Additio	'n
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET A	ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST	- ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Additio	0
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET A	NDDRESS		
CITY-ST-ZIP			54 CITY-ST	- ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Additio	n
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET A	DDRESS		-
CITY-ST-ZIP			6.4 CITY - ST	- ZIP		

4. 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 suppliemental 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.

Mila Manual THickard Common Marker and many