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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

May 07 1998 8:00am

Secretary of State

(850) 034-92.4L

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

P96000009748 (0)

	TY CONCRETE CONSTRUC							
Principal Place		Mailing Address						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
2026 HINSON PANAMA CIT	n avenue Ty Beach fl 32407		2026 HINSON AVENUE PANAMA CITY BEACH FL 32407					
		Trianini dili occioni i	L OLTO			DO NOT WRITE IN TH	HS SPACE	
						3. Date Incorporated or Qualified		
						01/29/1996		
	flace of Business	2a. Mailing Address	٦ , , , , , , , , , , , , , , , , , , ,			4. FEI Number	1	oplied For
Sulte, Apt.	# atc	Suite Apt # etc	Suite, Apt. #, etc.			59-3366603		lot Applicable Additional
22		27	<b>–</b>			5. Certificate of Status Desired		Additional Regulred
City & State	9	City & State				6. Election Campaign Financing		May Be
23		28	28			Trust Fund Contribution		to Fees
Zip	Country Zip Co			Country  8. This corporation owes or has paid the current year Intangible				
24	25 29 30		30	Personal Property Tax due June 30. 📈 Yes 🗌 No			□ No	
	9. Name and Address of Curre	nt Registered Agent		<u></u>		10. Name and Address of New Register	ed Agent	
	PPLEBAUM, STEVEN L		]*	M N	iame			ļ
	W OFFICES OF BRIAN D. HES	8	8	2 S	treet Addre	ess (P.O. Box Number is Not Acceptable)		
	08 FRONT BEACH ROAD		ļ <u>.</u>	13				
PA	NAMA CITY BEACH FL 32407		)°	13				,
			8	4 C	ity		85 Zip	Code
44 Pureuent	to the provisions of Sections 607.055	32 and 607 1508 Florida Statute	ne the abo	N/O-D3	mad corne			ite tegistered
agent. I a	egistered agent, or both, in the State in familiar with, and accept the oblig	e of Florida. Such change was a ations of, Section 607.0505, Flo	uthorized rida Statu	by the	e corporation	pration submits this statement for the purpos on's board of directors. I hereby accept the	appointment as	s registered
SIGNATURE	Stonature, typud or printed name of registered ag	ent and little if applicable (NOTE	Registered /	Agent si	anature requires	d when reinstating) DA1	Œ	
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS		RS IN 12
TITLE	\$	DELETE	1.1 TITL	E .			Change	Addition
NAME '	FAIRCLOTH, PAULA FOX		1.2 NAME					1
STREET ADDRESS	2026 HINSON AVE		1.3 STREET ADDRESS		RESS			J
CITY-ST-ZIP			1.4 CITY	1.4 CITY-ST-ZIP				
TITLE	D	☐ DELETE	ELETE 2.1 TITE		ļ		∐ Change	Addition
NAME	FOX, NYLA K		2.2 NAME					ļ
STREET ADDRESS	2026 HINSON AVENUE		2.3 STRE	2.3 STREET ADDRESS				
CITY-ST-ZIP	PANAMA CITY BEACH FL 3:		2.4 CIT		IP			
TITLE				3.1 TITLE			Change	Addition
NAME	FOX, WILLIAM R JR 8105 BLANCHE AVENUE		3.2 NAME					1
STREET ADDRESS	PANAMA CITY FL 32404		3.3 STREET ADDRESS		ŀ			
CITY-ST-ZIP TITLE	DELETE			3.4. CITY - ST - ZIP 4.1 TITLE			Change	Addition
NAME	<del>-</del>		4 2 NAM					
STREET ADDRESS			4.3 STRI		RESS			
CITY-ST-ZIP			4.4 CITY					
TITLE	☐ DELETE			5.1 TITLE		······································	☐ Change	Addition
NAME			5.2 NAM	ΙĒ	1		·	
STREET ADDRESS			5.3 STRE		RESS			ĺ
CFTY-ST-ZIP			5.4 CITY					
TITLE			6.1 THL				☐ Change	☐ Addition
NAME			6.2 NAM	E				
STREET ADDRESS			6.3 \$1RE	ET ADD	RESS			
CITY-ST-ZIP			6.4 CITY					
14. I hereby o	certify that the information supplied w	with this filling does not qualify fo	r the exen	nption	stated in S	Section 119.07(3)(i), Florida Statutes. I furthe e shall have the same legal effect as if made	r certify that the	e information
officer or	director of the corporation or the record Block 13 if changed, or on an atta	eiver or trustee empowered to e	execute th	s rep	orl as requi	ired by Chapter 607, Florida Statutes; and th	nat my name ap	opears in