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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9600030546

1. Corporation Name

## SONADA DEVELOPMENT & CONSTRUCTION CORPORATION

Principal Place	e of Business	Mailing Address					), 98(() #4(8) (		(11 01019 0171 1091
1935 RICHWOO	D LANE	1935 RICHWOOD LANE				1			
SARASOTA FL 34235		SARASOTA FL 34235			DO NOT WRITE IN THIS SPACE				
us		us			3. Date Incorporated or Qualifed				
						04/08/1996			{
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number			Applied For
21		26				65-0671970			Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			****	5. Certificate of Status Desired			5 Additional
22		27			5. Certificate of Status Desired		Fee	Required	
City & State	e	City & State			6. Election Campaign Financing		\$5.0	0 May Be	
23		28			Trust Fund Contribution		Adde	ed to Fees	
Zip	Country	Zip	Count	try		8. This corporation owes the curre	ent year Inta		
24	25 29 30					Personal Property Tax.		☐Yes	□No
	9. Name and Address of Current	Registered Agent		T	NI.	10. Name and Address of New R	egistered /	Agent	<del></del>
FOR			31	Name					
	PHILLIP D SOUTH ORANGE AVENUE	82			Street Addr	ess (P.O. Box Number is Not Accepta	ble)		
	••••	Ļ							
SARA	ASOTA FL 34236			33					İ
			8	34	City		FL	85 Zi	ip Code
44 Durayant	to the provisions of Sections 607.0502	and 607 1508 Florida Statutes	the abo	776	-named com	oration submits this statement for the	nurpose of	changing	its registered
office or re	egistered agent, or both, in the State o m familiar with, and accept the obligati	t Florida. Such change was auti	norizea i	Dyτ	ine corporation	on's board of directors. I hereby accep	t the appoir	ntment as	registered
SIGNATURE									ļ
Signature, typed or printed name of registered agent and title if applicable. (NOTE:				egistered Agent signature requir			DATE		
12.	OFFICERS AND		13.		<del></del>	ADDITIONS/CHANGES TO OFF	-ICERS AN		
TITLE	PSTD DELETE			1.1 TITLE				Chang	je 🗆 Kodinon j
NAME	ROSS, RICHARD E		1.2 NAM						ŀ
STREET ADDRESS	3510 RICHWOOD LINK		1.3 STR	EET,	ADDRESS				1
CITY-ST-ZIP	SARASOTA FL 34235			1.4 CITY-ST-ZIP				<u></u>	- D Addition
TITLE	☐ DELETÉ		2.1 TITLE					Chang	ge 🗌 Addition
NAME			2.2 NAME						,
STREET ADDRESS			2.3 STR	EET	ADDRESS				]
CITY-ST-ZIP			2. 4 CIT		r-ZIP	<u> </u>		[ ] Chang	ge Addition
TITLE		☐ DELETE						CT cuant	je 🗆 Addition i
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREET ADDRESS		ADDRESS				
CITY-ST-ZIP			3.4. CIT		T-ZIP		_ <del>_</del>	□ Chanc	ge Addition
TITLE		☐ DELETE	4.1 TITL					L] Chan	de □ voorgou
NAME			4. 2 NA						
STREET ADDRESS				_	ADDRESS				
CITY-ST-ZIP		□ pereze	4.4 CITY		- ZIP			[] Chang	ge Addition
TITLE		☐ DELETE	5.1 TITL 5.2 NAM				•	Chané	le Clyngingis
NAME					ADDOCCO				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		□ SELETE	5.4 CITY 6.1 TITL		- ZIP			[] Chang	ge Addition
TITLE		☐ DELETE	6.2 NAM					- Cuang	io C: Mudiion
NAME					* DODEO:				,
STREET ADDRESS			6.3 STR	EET	ADORESS				

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 an adtachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

TRESIDEN SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

941.366.3060

Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90032 036 \*\*\*150.00