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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000042137

1. Corporation Name

ANDERS	ON CONSTRUCTION CORP	PORATIC)N	,					
Principal Place	of Business	Mailin	g Address					// III	EB (1117) (DBI (BB)
3077 9TH STRE		3077 9	TH STREET						
ORLANDO FL 32820 : ORLANDO FL 32820							DO NOT WRITE IN THIS SPACE		
	J -						3. Date Incorporated or Qualified	SPACE	
							05/17/1996		ļ
9 Principal Pl	ace of Business	2a. M:	ailing Address			_	4. FEI Number		pplied For
21	ado or business	26	aming rico.coc				59-3381573	 	lot Applicable
	#, etc	\rightarrow	uite, Apt. #, etc.					\$8.75	Additional
22	.,	27	•				5. Certificate of Status Desired	Fee F	Required
City & State		Ci	ity & State				6. Election Campaign Financing	\$5.00	May Be
23		28				_	Trust Fund Contribution	Added	to Fees
Zip	Country Zip			Country			8. This corporation owes the current year Int	angible	
24	25 29 3						Personal Property Tax.	☐ Yes	X)No
Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent		
ANDERSON, RAYMOND 254 SEAKOVE STREET PANAMA CITY BEACH FL 32413					32 Street	NDERSON RAYMOND et Address (P.O. Box Number is Not Acceptable)			
				[~) 30'	77 _	9TH ST		
					84 City ORLANDO FL 85 Zip Code 32820			2820	
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligati	of Florida .	Such change was auth	onzed t	ov tne corpo	corpo oration	ration submits this statement for the purpose of i's board of directors. I hereby accept the appoi	nument as i	s registered egistered
SIGNATURE	Signature, typed or printed name of registered agent		PAYMO (NOTE: Re	ND gistered A	ANDER	SOI	N - PRESIDENT / STE		
12.	OFFICERS AND	D DIRECT	ORS	13.			ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	PS		☐ DELETE	1.1 TITL	E	D/		K Change	Addition
NAME	ME ANDERSON, RAYMOND				1.2 NAME A		IDERSON, RAYMOND		
STREET ADDRESS 254 SEAKOVE STREET				1.3 STREET ADDRESS 3		30	77 9TH ST.		İ
CITY-ST-ZIP PANAMA CITY BEACH FL							LANDO, FL 32820		
TITLE			☐ DELETE	2.1 TITL	E	D/	S	Change	X Addition
NAME				2.2 NAM	E	AN	IDERSON, FRANCES		
STREET ADDRESS				2.3 STR	EET ADDRESS	.30	7-7_9TH_ST.		
CITY-ST-ZIP				2. 4 CIT	Y-ST-ZIP	OB	LANDO, FL 32820		
TITLE			☐ DELETE	3.1 TITU	E	\	•	Change	Addition
NAME				3.2 NAM	E.				
STREET ADDRESS				3.3 STR	EET ADDRESS			,	
CITY-ST-ZIP				3.4. CIT	Y+ST+ZIP	<u> </u>			
TITLE			☐ DELETE	4.1 TITL	E			☐ Change	Addition
NAME				4.2 NA	AE.				
STREET ADDRESS	•			4.3 STR	EET ADDRESS				

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 attachment with an address, with all other like empowered.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-Z)P

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

REQUIRTRAYMOND ANDERSON 2-13-5

☐ DELETE

☐ DELETE

407-568-0800

☐ Change

Change

6

Addition

Addition