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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

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Apr 16 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000046699 (0)

JAMES H. STEWART CONSTRUCTION, INC.

Principal Place of Business Mailing Address 9064 PALOMINO DRIVE 9064 PALOMINO DRIVE LAKE WORTH FL 33467-1024 LAKE WORTH FL 33467 3. Date Incorporated or Qualified 3a. Date of Last Report 05/29/1996 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 26 65-0676746 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Žφ Country Country Zip This corporation has liability for intangible tax under s. 199.032, 25 30 Yes 24 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name STEWART, JAMES H 9064 PALOMINO DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) LAKE WORTH FL 33467 83 RA City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent it am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registeroid agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6)Addition THILE DELETE 1.1 TITLE ☐ Change 1.2 NAME NAME STREET ADDRESS 1,3 STREET ADDRESS Lakeworth Fl 33467 1.4 CITY-ST-ZIP CITY - ST - 7IF DELETE Addition Change TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CHY-\$1-7IP 2 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CHY-\$1-7/P 34. CITY-ST-ZIP DELETE ☐ Change Addition T:TLF 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CiTY - ST - ZIP DELETE Change Addition 5.1 TITLE 7111.8 NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CHY-ST-ZIP 5.4 CITY-ST-7iP DELETE Change ■ Addition 6.1 TITLE TiTLE NAME 6.2 NAME STREET ADORESS 6.3 STREET ADDRESS 6 4 CITY - ST - ZIP CITY-SU-7/P

14. I do 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, of on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR