PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # POSOCOA7333

Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90064 034 ***150.00

1. Corporation FINWAY	BUILDERS, INC.				
Principal Place	e of Business	Mailing Address		, , , , , , , , , , , , , , , , , , ,	
1816 NW 38TH STREET 4900 SW 17TH TERR GAINESVILLE FL 32605 GAINESVILLE FL 32608-3912 US					
				DO NOT WRITE IN T	HIS SPACE
		US		3. Date Incorporated or Qualifed	
				05/29/1996	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
:/	SWITTER	26		59-3395851	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	NESULLE, FL	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country Zip			Country 30	This corporation owes the current year Personal Property Tax.	Intangible ☐ Yes 凇 No
24,7-5	9. Name and Address of Curren			10. Name and Address of New Register	ed Agent
			81 Name	• :	
HARVEY, RUSSELL C.			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
-1816 NW 38TH STREET			or or or had	1000 (1.10. Dox (10.1100 10.1100 11.110)	
GAIN	NESVILLE FL 32605		83		
			84 City		85 Zip Code
					-L
11. Pursuant office or r agent. I a	to the provisions of Sections 607.050: egistered agent, or both, in the State of m familiar with, and accept the obligation of the control of	2 and 607.1508, Florida Statute of Florida. Such change was au tions of, Section 607.0505, Flori	s, the above-named corporation that the corporation of the corporation	poration submits this statement for the purpose ion's board of directors. I hereby accept the ap	pointment as registered
	Signature, typed or printed name of legistered agen	<u> </u>	Registered Agent signature require		+10 DIDECTOR 0 IN 12
12.	OFFICERS AN	D DIRECTORS /	13.	ADDITIONS/CHANGES TO/OFFICERS	Change Addition
TITLE	P PURCEY BURGETT C		1.1 TITLE		
NAME	HARVEY, RUSSELL C		1.2 NAME		
STREET ADDRESS	4500 SW 17TH TERR GAINESVILLE FL 32608		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	GAINESVILLE PL 32000	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME			2.2 NAME		_ · ·
}	}		2.3 STREET ADDRESS		
STREET ADDRESS. CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		·
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		İ
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS	1		6.3 STREET ADDRESS		i

6.4 CITY-ST-ZIP CITY-ST-ZiP 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.

SIGNATURE:

STREET ADDRESS