

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jun 19 1997 8:00am
Secretary of State

DOCUMENT # P96000056744 (1)

1. Corporation Name

MANUCY BROTHERS CONSTRUCTION CO., INC.

Principal Place of Business

1555 DOEHLER AVENUE
ST. AUGUSTINE FL 32095

Mailing Address

1555 DOEHLER AVENUE
ST. AUGUSTINE FL 32095-2490



2. Principal Place of Business

21 5105 PORTER RD

Suite, Apt. #, etc.

22 ST. AUGUSTINE, FL

City & State

Zip

24 32095

Country

25 USA

2a. Mailing Address

26 5105 PORTER RD

Suite, Apt. #, etc.

27 ST. AUGUSTINE, FL

City & State

Zip

29 32095

Country

30 USA

9. Name and Address of Current Registered Agent

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

3. Date Incorporated or Qualified

07/05/1996

3a. Date of Last Report

4. FEI Number

59-3396765

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes ☒ No ☐

10. Name and Address of New Registered Agent

81 Name Alonzo Manucy, Jr.

82 Street Address (P.O. Box Number is Not Acceptable)

5105 Porter Road

83

84 City St. Augustine

FL

85 Zip Code

32095

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Alonzo H. Manucy, Jr.

Signature, typed or printed name of registered agent and title if applicable

(If not, Registered Agent's signature required when reinstating)

June 15/97

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD ☐ DELETE

NAME MANUCY, ALONZO H JR.
STREET ADDRESS 1555 DOEHLER AVENUE
CITY-ST-ZIP ST. AUGUSTINE FL 32095

TITLE VSD ☒ DELETE

NAME MANUCY, EARL M
STREET ADDRESS 1555 DOEHLER AVENUE
CITY-ST-ZIP ST. AUGUSTINE FL 32095

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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, or on an attachment with an address.

SIGNATURE [Signature]

CR2E034 (9/96)