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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

P96000065408 (2)

FLORIDA MAINTENANCE & CONSTRUCTION, INC.

Mailing Address

FILED

Feb 11 1998 8:00am

Secretary of State

Principal Place of Business 3011 DEMONTMOLLIN RD. 3011 DEMONTMOLLIN RD. PLANT CITY FL 33565 PLANT CITY FL 33565 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/05/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-3392889 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country  $2 \varpi$ Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FEDUCCIA, MICHAEL G 3011 DEMONTMOLLIN RD. 82 Street Address (P.O. Box Number is Not Acceptable) PLANT CITY FL 33565 **R**3 City Zip Code 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 3 am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Signature: typed or printed name of repistered agent and title if applicable (NOT). Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE Addition 1.1 TITLE Change BEDGOOD, ROBERT E NAME 1.2 NAME PEDUCCIA, MICHAEL G 2213 CAMBRIDGE AVE STREET ADDRESS 1.3 STREET ADDRESS 3011 DeMONTMOLLIN ROAD LAKELAND FL 33803 CITY-ST-ZIP 1.4 CITY-ST-ZIP FL 33565 PLANT CITY DELETE 2.1 TITLE Change Addition NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST-ZIP DELETE TITLE 4.1 TITLE ☐ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change ■ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Спалде Addition NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. Thereby 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 address

SIGNATURE:

Michael G. E. Auger