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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000079980

HEPWORTH & SON CONSTRUCTION, INC.

Principal Place of Business	Mailing Address
7514 CANAL DRIVE	7514 CANAL DRIVE
LAKE WORTH FL 33467	LAKE WORTH FL 33467
•	•

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90161 007 ***150.00



Principal Place of Business	Mailing Address					
7514 CANAL DRIVE AKE WORTH FL 33467	7514 CANAL DRIVE LAKE WORTH FL 33467		DO NOT WRITE IN THIS SPACE			
	•		3. Date Incorporated or Qualifed 09/26/1996			
2. Principal Place of Business	2a. Mailing Address		4. FEI Number Applied For 65-0700417 Not Applicable			
Suite, Apt. #, etc.	26 Suite, Apt. #, etc.		5. Certificate of Status Desired 5. Certificate of Status Desired Fee Required			
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
Zip Country 4 25	Zip Co	ountry	8. This corporation owes the current year Intangible Personal Property Tax.			
9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Registered Agent			
HEPWORTH, C G		81 Name				
7514 CANAL DRIVE		82 Street Addr	ress (P.O. Box Number is Not Acceptable)			
LAKE WORTH FL 33467		83	,			
	•	84 City	FL 85 Zip Code			
 Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the Sta agent. I am familiar with, and accept the obli 	te of Florida. Such change was authorize	ed by the corporation	oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered			
SIGNATURE			·			

SIGNATURE	Signature, typed or printed name of registered agent and title if ap	nicoble (NOTE: R	legistered Agent signature re	ouired when reinstating)		DATE	
12.	Signature, typed or printed name or registered agent and title it applicable. (NOTE: ALL OFFICERS AND DIRECTORS			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	☐ DELETE	13. 1.1 TITLE			Change	☐ Addition
NAME	HEPWORTH, C G		1.2 NAME		,		
STREET ADDRESS	7514 CANAL DRIVE		1.3 STREET ADDRESS	,			
CITY-ST-ZIP	LAKE WORTH FL 33467		1.4 CITY-ST-ZIP				_
TITLE	D	☐ DELETE	2.1 TITLE	,		Change	☐ Addition
NAME	HEPWORTH, ROSE		2.2 NAME		,	**	
STREET ADDRESS	7514 CANAL DRIVE	-	2.3 STREET ADDRESS	1 may 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- 414 - S		
CITY-ST-ZIP	LAKE WORTH FL 33467		2. 4 CITY- ST-ZIP				
TITLE	D	☐ DELETE	3.1 TITLE			☐ Change	Addition
NAME	DESSUREAULT, JOSEPH R		3.2 NAME				
STREET ADDRESS	510 PURITAN ROAD		3.3 STREET ADDRESS				
CITY-ST-ZIP	WEST PALM BEACH FL 33405	···	3.4. CITY- \$T-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 YITLE		•	Change	Addition
NAME			5.2 NAME			•	
STREET ADDRESS			5.3 STREET ADDRESS		•		
CITY-ST-ZIP	<u>. </u>		5.4 CITY-ST-ZIP				F-71 A 1 1/1/2
TITLE	t a de la company	DELETE	6.1 TITLE			☐ Change	Addition
	Careford Careford		6.2 NAME				
STREET ADDRESS	[1] [1] [1] [1] [1] [1] [1] [1] [1] [1]		6.3 STREET ADDRESS				
CITY-ST-ZIP	CR14 00	1	6.4 CITY-ST-ZIP		(i) Elevido Statutas I fu		

indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informalisindicated 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