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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000080880 (3)

**AUSTIN DOCKS & DECKS, INC.** 

## **FILED** May 11 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address			ANIQU PONTO DELLA TRANS TONTO ARGO TORI
4045 COX DRIVE 4045 COX DRIVE					•
LAND O'LAKES FL 34639		LAND O'LAKES FL 34639		DO NOT INDITE IN THIS SPACE	
				DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualified	
				09/26/1996	
6 Ovlesinal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 4045			NND DR	59-3402148	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.	MND WA		SR 75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State City & State				6. Election Campaign Financing	\$5.00 May Be
23 TAMER	9 7,44	28 TAMPA 711	Α	Trust Fund Contribution	Added to Fees
Zip	Country	Zip 336/5	Country-7/ A	8. This corporation owes or has paid	d the current year Intangible
24 336/5	25 NECO	29 3 (7)	0 11-11-1	Personal Property Tax due June	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Reg	Istered Agent
AUSTIN, FRED M JR.				a m Aut & G	
1200				dress (P.O. Box Number is Not Acceptabl	θ)
TAMPA FL 33615			1/02/2	out Island In	
			83		
			84 City		B5 Zip Code
			Y#A1	npa 7219	FL   336/5
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the above-named or	orperation submits this statement for the puration's board of directors. Thereby accept	rpose 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/43-77 Aursti 4-30-98					
	Signature, typed or printeb name of registered agent		Registered Agent signature re-	aulired when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE ERS AND DIRECTORS IN 12
12.	OFFICERS AND	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO CITIES	Change Addition
NAME	AUSTIN, FRED M JR.	La octor		m Audin h	
STREET ADDRESS	4045 COX DRIVE		1.3 STREET ADDRESS	The Milliam Is	
	LAND O'LAKES FL 34639		1.4 City-St-ZiP	anoa zla 331.15	
CITY-ST-ZIP TITLE	VSTD	DELETE	2.1 TITLE	towhere trees 300/3	Change Addition
NAME	STEFFENS, JOSEPH E	-	2.2 NAME		_
STREET ADDRESS	4045 COX DRIVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	LAND O'LAKES FL 34639		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		
STREET ADDRESS			5.3 STREF1 ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE	-	☐ DELET€	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		( with an amoutiful short att a linformant'
14. I hereby c	ertify that the information supplied will	n this filing does not qualify for	the exemption stated	in Section 119.07(3)(i), Florida Statutes. I f	urther certify that the information

Indicated on this annual report or supplied with this timing does not quality for the exemption stated in Section 119.07(5)(f), Florida Statutes, Triumber Certay with the indicated on this 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.