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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STAT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000084323 (0)

TEDDER CONSTRUCTION SERVICES, INC.

Principal Place of Business Mailing Address

3757 ARROWHEAD RD 3757 ARROWHEAD RD
ST AUGUSTINE FL 32086 ST AUGUSTINE FL 32086

FILED May 11 1998 8:00am Secretary of State



21 MOODSIM	R: PL 32000	ST AUGUSTINE PL 32005				DO NOT WRITE IN THIS SPACE	
						Date Incorporated or Qualified 10/10/1996	
9 Principal P	lace of Business	2a. Mailing Add	lines	 -		4. FEI Number	Applied For
21 1 1 1 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2	add of boshess	26	,, 653			59-3425648	Not Applicab
Suite, Apt.	# etc	Suite, Apt. #	t etc				\$8.75 Additional
22		27	27			5. Certificate of Status Desired	Fee Required
City & State	9	City & State	•			Election Campaign Financing	\$5.00 May Be
3		28				Trust Fund Contribution	Added to Fees
Zip	Country	Zip	<u> </u>	Country	1	8. This corporation ewes or has paid the cu	
4	25	29	30	L			Yes No
	g. Name and Address of Cur	rent Registered Agent			T *:	10. Name and Address of New Registered	Agent
TEDDER, RODNEY D 3757 ARROWHEAD RO				81 Name			
				82	Street Add	dress (P.O. Box Number is Not Acceptable)	
ST AUGUSTINE FL 32086					0	siede (* i.e. Ben itaniben ie itali, ie eep iable)	
				83			
				ļ	<u> </u>		
				84	City	FL	85 Zip Code
SIGNATURE	rn tamiliar with, and accept the ob-			_		rporation submits this statement for the purpose cation's board of directors. I hereby accept the appured when reinstating) DATE	
40		AND DIRECTORS	(NOTE: NO	13.	ant eignature requ	ADDITIONS/CHANGES TO OFFICERS ANI	D DIDCOTORS IN 42
12. TITLE	PD		DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME	TEDDER, RODNEY D	<u> </u>	JEEC 12	1.2 NAME	1		
	3757 ARROWHEAD RD				ſ		
STREET ADORESS	ST AUGUSTINE FL 32088		1		1 ADDRESS		
CITY-ST-ZIP	ST AUGUSTRIE PL 32000		SELEXE	1.4 CITY-5	ST-ZIP		C Olympia C Respire
TITLE		<u></u> , r	DELETE	2.1 TITLE	ł		Change Addition
NAME				2.2 NAME			
STREET ADDRESS				2.3 STREET	T 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	T ADDRESS		
CITY-ST-ZIP		·		3.4. CITY-	ST-ZIP		
TITLE			DELETE	4.1 TITLE	1		Change Addition
NAME				4. 2 NAME	-		
STREET ADDRESS			i	4.3 STREET	T ADDRESS		
CITY-ST-ZIP				4.4 CITY-	ST - ZIP		
TITLE			DELETE	5.1 TITLE			Change Addition
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STREET ADDRESS			ł		T ADDRESS		
CITY-ST-ZIP			ì	5.4 CITY-1			
TITLE		T I	DELETE	6.1 TITLE	·· •"		Change Addition
NAME		<u> </u>	· ·	6.2 NAME	1		
					1	1	
STREET ADORESS			1		T ADDRESS		
CITY - ST - ZIP	and to that the interval on a ranker			6.4 CITY-5	51 - ZIP	- Cooking 110 07(2)(i) Florida Cintutes I further a	and the short short information

14. I noreby certify that the information supplied with this hing does not quality 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:

MONATURE AND TYPED OF PRINTED NAME OF SIGNAMO OFFICER OF DIRECTO

4-29-98

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