Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90103 037 ***150.00

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 # P9600090277

1. Corporation Name

ELIZABETHAN CONSTRUCTION SERVICES, INC.

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Principal Place of Business Mailing Address									
302 MORNING GLORY DRIVE LAKE MARY FL 32746		302 MORNING GLORY DRIVE LAKE MARY FL 32746			DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualifed			
						11/04/1996			
2 Bringing B	ace of Business	2a. Mailing Address				4. FEI Number	$\neg \top$	Ann	lied For
Z. Fillicipal F	ace of business	26				59-3408590		<u>_</u>	Applicable
Suite, Apt.	# otc	Suite, Apt. #, etc.				_	\$8		dditional
_ ` `	m, 610.	— '				5. Certifcate of Status Desired	· ·	ee Req	
City & State	<u> </u>	City & State				6. Election Campaign Financing	.2	5.00 N	Aav Be
-		28				Trust Fund Contribution	•	dded to	- 1
23 Zip	Country	Zip	Countr	~		8. This corporation owes the current year In	tangible		
	25	<u> </u>	0	,		Personal Property Tax.	☐Ye		□No
24	9. Name and Address of Current		,			10. Name and Address of New Registered	Agent		
	3. Name and Addiess of Correct	Inagistoria rigani	8	1 7	Name				
WAF	id. Wendi		_						
	MORNING GLORY DRIVE		8:	2	Street Addres	ss (P.O. Box Number is Not Acceptable)			
	MARY FL 32746	<u> </u>							
-				1	•	·			
			8	4	City	FI	85	Zip C	ode
11 Dureuant	to the provisions of Sections 607 0502	and 607 1508 Florida Statutes	the abo	ve-r	named corpor	ration submits this statement for the purpose of	f changi	ng its r	egistered
office or r	egistered agent, or both, in the State of m familiar with, and accept the obligati	if Florida. Such change was aut	norizea b	v tn	e corporation	's board of directors. I hereby accept the appo	intment	as reg	istered
SIGNATURE						when reinstating) DATE			
	Signature, typed or printed name of registered agent			ent si	ignature required v	ADDITIONS/CHANGES TO OFFICERS A	ND DIE	ECTO	20 IN 12
12.			_	13.		ADDITIONS/CHANGES TO OFFICERS A			Addition
TITLE	PTS	☐ DELETE	1,1 TITLE					idiigo .	
NAME	WARD, WENDI		1.2 NAME						
STREET ADDRESS	302 MORNING GLORY DR		1.3 STRE						Ì
CITY-ST-ZIP	LAKE MARY FL 32746		1.4 CITY-		ZIP		CI		Addition
TITLE		☐ DELETE	2.1 TITLE					larige	☐ Addition
NAME.			2.2 NAME	Ξ					
STREET ADDRESS	man residuation to the same against the same		2.3 STRE	ETA	DDRESS			ي ، -	
CITY-ST-ZIP			2. 4 CITY		ZIP				
TITLE		☐ DELETE	3.1 TITLE				□ch	ıange	Addition
NAME			3.2 NAME	=	1				
STREET ADDRESS			3.3 STRE	ET AI	DDRESS				
CITY-ST-ZIP			3.4. CITY	- \$T-2	ZIP				
TITLE		☐ DELETE	4.1 TITLE				Ľ] CI	nange	☐ Addition
NAME		•	4. 2 NAM	E					
STREET ADDRESS			4.3 STRE	ET AI	DDRESS				
CITY-ST-ZIP			4.4 CITY-	ST-2	ŽIP I				
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NAME			5.2 NAME	Ε	}				
STREET ADDRESS			5.3 STRE	ETA	DORESS				
CITY-ST-ZIP			5.4 CITY-	-ST-2	ZIP				
TITLE		☐ DELETE	6.1 TITLE		1			hange	Addition
NAME		_	6.2 NAME	E					
			6.3 STRE		DORESS				
STREET ADDRESS	İ								

14. I 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 of 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 of 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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR