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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

May 09 1997 8:00am

Secretary of State

DOCUMENT # **P96000091093 (0)**

BOOTON CONSTRUCTION COMPANY, INC.

Principal Place of Business Mailing Address 165 SPRINGWOOD DRIVE 165 SPRINGWOOD DRIVE DAYTONA BEACH FL 32119 DAYTONA BEACH FL 32119-1460 3. Date Incorporated or Qualified 3a. Date of Last Report 11/04/1996 2. Principal Place of Business 2a. Mailing Address Applied For 59-3415755 Not Applicable 26 Suite, Apl. #, etc. Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 23 Trust Fund Contribution 28 Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yes 🙀 No 24 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **BOOTON, JACK E** 165 SPRINGWOOD DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) **DAYTONA BEACH FL 32119** 83 84 Zip Code 11. 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTI Registered Agent's gnature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. 96/6) DELETE Addition Change TITLE 11 TITLE BOOTON, JAMES G BOOTON, JACK E NAME 1.2 NAME 165 springwood dr 165 SPRINGWOOD DRIVE 1,3 STREET ADDRESS STREET ADDRESS Daytona Beach, FL. 32119 DAYTONA BEACH FL 32119 1.4 CITY - \$1 - ZIP CITY-ST-7/P DELETE Addition 2.11016 ☐ Change TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CHY-ST-ZIP 2. I CITY-ST-ZIP DELETE 3.1 TITLE Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$1 - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE 5.1 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 53 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change DELFTE Addition 6.1 TITLE NAME 6.2 NAM? 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY - \$1 - ZIP

14. I do hereby certify that the information supplied with this filling 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 eath; 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.