

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

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98 NOV 23 PM 2:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000095442

1. Corporation Name  
Apelquist Framing & Construction, Inc.

Principal Place of Business Mailing Address  
1579 Scott Ridge Lane 1579 Scott Ridge Lane  
Jacksonville, FL 32259 Jacksonville, FL 32259

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	59-3413810	Not Applicable
Suite Apt # etc	Suite Apt # etc	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	27	<input type="checkbox"/>	
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23	28	<input type="checkbox"/>	
Zip	Zip	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
24	29	32257	
Country	Country	USA	
25	30		

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Phillip E. Apelquist  
1579 Scott Ridge Lane  
Jacksonville, FL 32259

81 Name	82 Street Address (P.O. Box Number)	83 City	84 Zip Code
	300002698233	11/30/98 01137-023	****150.00 ****150.00
		FL	

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-STATE-ZIP		1.4 CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-STATE-ZIP		2.4 CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-STATE-ZIP		3.4 CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-STATE-ZIP		4.4 CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-STATE-ZIP	

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 contained in 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 807, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed or an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Resigned  
11-20-98

Date

Daytime Phone #

CR2E034 (10/97)

## ACCUWRITE BUSINESS GROUP, INC.

Mary Ann Carlson  
d/b/a Accuwrite Accounting  
2955 Hartley Road, Suite 204  
Jacksonville, Florida 32257

Telephone 904-262-7034  
Fax 904-262-1226

November 19, 1998

Division of Corporations  
Annual Report/Reinstatement Section  
P.O. Box 6327  
Tallahassee, FL 32314-6327

RE: Apelquist Framing & Construction, Inc.  
P96000095442

Dear Sir:

We received a notice from the state stating the above corporation has been dissolved effective October 16, 1998. This is not correct. After researching this matter, the taxpayer filed his corporation annual report for 1998 in a timely manner. I have attached a copy of the form showing that it was completed. The check sent with this form for \$150.00 has never cleared the bank; therefore, the form and the check have been lost in the mail.

We are requesting that the state reverse this dissolution of the corporation and except a copy of the original annual report and another check for \$150.00 for the fee.

Your immediate attention to this matter is greatly appreciated.

Sincerely,



Mary Ann Carlson, E.A.  
Accountant

cc: Mr. Philip E. Apelquist

enclosures