

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

002984

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90212 048 ***150.00

DOCUMENT # P96000100199

1. Corporation Name D.J. EDDER CONSTRUCTION, INC.



Principal Place of Business 4647 S MOON TRAIL PORT ORANGE FL 32119
Mailing Address D.J. EDDER CONSTRUCTION INC P.O. BOX 352086 PALM COAST FL 32135 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 326 MOODY BLVD 22 Suite, Apt. #, etc. 23 FLAGLER BEACH FL. 24 32136 25 FLAGLER
2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 29 30

3. Date Incorporated or Qualified 12/10/1996
4. FEI Number 59-3415823 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent EDDER, DONALD J 4647 S MOON TRAIL PORT ORANGE FL 32119

10. Name and Address of New Registered Agent 81 Name DONALD J. EDDER 82 Street Address (P.O. Box Number is Not Acceptable) 74 BERKSHIRE LN. 83 84 City PALM COAST FL 85 Zip Code 32137

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 Donald J. Edder APRIL 27, 1999
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
TITLE P DELETED
NAME EDDER, DONALD J
STREET ADDRESS 4647 SOUTH MOON TRAIL
CITY-ST-ZIP PORT ORANGE FL
TITLE VST DELETED
NAME EDDER, CANDACE G
STREET ADDRESS 4647 SOUTH MOON TRAIL
CITY-ST-ZIP PORT ORANGE FL
TITLE DELETED
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE DELETED
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE DELETED
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE VP Change Addition
1.2 NAME MARY A. EDDER
1.3 STREET ADDRESS 74 BERKSHIRE LN
1.4 CITY-ST-ZIP PALM COAST FL 32137
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-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 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, with all other like empowered.

SIGNATURE: Donald J. Edder APRIL 27, 1999 (904) 447-0419
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/198)