**FILED** 

Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90155 034 \*\*\*150.00

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris . /

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000028629

1. Corporation Name

Principal Place of Business

DARNELL & DAVIS CONSTRUCTION, INC.

325 N 14THST QUINCY FL 323 US	·	325 N 14TH ST QUINCY FL 32351 US		DO NOT WRITE IN THIS SPACE				
					Date Incorporated or Qualifed     04/01/1997			
Principal Place of Business     Za. Mailing Address					4. FEI Number	Apr	plied For	
21		26		59-3435573	No	t Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 Additional Fee Required		
_ City & State _		- City & State		-6. Election Campaign Financing	\$5.00	May Be		
23		28		Trust Fund Contribution	Added to	o Fees		
Zip	Country 25	Zip 3	Country 30		8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No			
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registerer	1 Agent		
DAD	NEH 1555		81	Name	Section 1			
DARNELL, JEFF 3255 N 14TH ST QUINCY FL 32351			82	Street Ad	ddress (P.O. Box Number is Not Acceptable)			
			83					
-352 e - 455 'E'		· · · · · · · · · · · · · · · · · · ·	84	City	學以為這數學學與 <b>F</b>	85 Zip C	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			nt signature requ	uired when reinstating) DATE	ND DIDECTO	DC IN 42	
12.	/ OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS A	Change	Addition	
TITLE	P PARMELL HEEE	L'I DETE LE	1.1 TITLE			☐ Change	LJ Addition	
NAME	DARNELL, JEFF		1.2 NAME	Į				
STREET ADDRESS	325 2 14TH ST			TADORESS				
CITY-ST-ZIP	QUINCY FL 32351		1.4 CITY-S	T-ZIP			- Addition	
TITLE		☐ DELETE	2.1 TITLE	ļ	~ <sub>~</sub>	Change	Addition	
NAME			2.2 NAME					
STREET ADDRESS			2.3 STREE	TADDRESS			ĺ	
CITY-ST-ZIP			2.4 C/TY-5	ST-ZIP			Addition	
TITLE		☐ DELETE	3.1 TTLE	1	•	☐ Change	Addition	
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STREET ADDRESS				TADDRESS			İ	
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NAME			1	TADDRESS				
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CITY-ST-ZIP		☐ DELETE	6.1 TITLE	1-411		☐ Change	Addition	
TITLE			6.2 NAME				□ voorgou	
NAME				TADDBESS	-		-	
STREET ADDRESS			6.3 STREET ADDRESS (				Ì	
CITY-ST-ZIP			0.4 (1111-3	1-LIF				

SIGNATURE:

NAME OF SIGNING OFFICER OR DIRECTOR

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.