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FILED
May 07 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000029970 (5)

1. Corporation Name

CHILDERS CONSTRUCTION COMPANY

Principal Place of Business

115 W. OLYMPIA AVE.
PUNTA GORDA FL 33950

Mailing Address

115 W. OLYMPIA AVE.
PUNTA GORDA FL 33950

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/02/1997

4. FEI Number

65-0753833

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 or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

2. Principal Place of Business

21 22252 Montrose Ave

Suite, Apt. #, etc.

2a. Mailing Address

26 22252 Montrose Ave

Suite, Apt. #, etc.

City & State

23 Port Charlotte, Fla

Zip

Country

City & State

28 Port Charlotte, Fla

Zip

Country

24 33952

25 Charlotte

29 33952

30 Charlotte

9. Name and Address of Current Registered Agent

HACKETT, JACK O II
115 W. OLYMPIA AVE.
PUNTA GORDA FL 33950

10. Name and Address of New Registered Agent

81 Name

James R. Matthew

82 Street Address (P.O. Box Number is Not Acceptable)

22212 Montrose Ave.

83

84 City

Port Charlotte

FL

85 Zip Code

33952

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

JAMES R MATTHEW

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4-13-98

DATE

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME CHILDERS, JOHN D
STREET ADDRESS 22252 MONTROSE AVE.
CITY-ST-ZIP PORT CHARLOTTE FL 33952

TITLE DT ☐ DELETE

NAME CHILDERS, LISA M
STREET ADDRESS 22252 MONTROSE AVE.
CITY-ST-ZIP PORT CHARLOTTE FL 33952

TITLE DV ☐ DELETE

NAME CHILDERS, BRIAN W
STREET ADDRESS 1107 GARRISON AVE.
CITY-ST-ZIP PORT ST. JOE FL 32456

TITLE DS ☐ DELETE

NAME CHILDERS, RODGER W
STREET ADDRESS 1107 GARRISON AVE.
CITY-ST-ZIP PORT ST. JOE FL 32456

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

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 in an attachment with an address.

SIGNATURE:

J. Childers

4-1-98 (941) 764-7884

CR2E034 (10/97)