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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000037092

J.L. SMITH CONSTRUCTION CO., OF NORTHWEST FLORID A. INC.

Principal Place of Business

CITY-ST-ZIP

B-A BROOKS AVENUE FT. WALTON BEACH FL 32547-6716

Mailing Address 8-A BROOKS AVENUE

FT. WALTON BEACH FL 32547-6716

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90234 042 ***158.75

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DO NOT WRITE IN THIS SPACE

					3. Date Incorporated or Qualifed	
					04/25/1997	
2. Principal P	lace of Business	Za. Mailing Address			4. FEI Number 1 Applied For	
21		26			-59-344 1909 39-344/907 Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5 Carifford of Status Basins W \$8.75 Additional	
22	والمنافقة والمستوان والمست	27			5. Certificate of Status Desired Fee Required	
City & State	9	City & State			6. Election Campaign Financing \$5.00 May Be	
23					Trust Fund Contribution Added to Fees	
Zip	Country Zip Cou			/	8. This corporation owes the current year Intangible	
24	25 29 30				Personal Property Tax.	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
APPROPRIES A LAURE A				81 Name		
PERRI, DANIEL C			82	Street A	Address (P.O. Box Number is Not Acceptable)	
5 CLIFFORD DRIVE SHALIMAR FL 32579				0	() () () () () () () () () ()	
SHA		83				
			84	City	85 Zip Code	
				\	FL as 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. (NOTE: Registered A				nt signature re	equired when reinstating) DATE ADDITION OF TO OFFICE FOR AND DIDECTORS IN 42	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DST	☐ DELETE	1.1 TITLE	ł	☐ Change ☐ Addition	
NAME (SMITH, CHERYL A	1	1.2 NAME	İ		
STREET ADDRESS	308 ECHO CIRCLE		1.3 STREE	T ADDRESS		
CITY-ST-ZIP	FORT WALTON BEACH FL 3254		1.4 CITY-S	T-ZIP		
TITLE	P	☐ DELETE	2,1 TILE		☐ Change ☐ Addition	
NAME	SMITH, JOHN L		22 NAME	ļ		
STREET ADDRESS	308 ECHO CIRCLE	l	2.3 STREE	T ADDRESS		
-CITY-ST-ZIP	FT. WALTON: BEACH: FL-32548		-2.46ffY-	ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE	ľ	☐ Change ☐ Addition	
NAME	•	!	3.2 NAME	į		
STREET ADDRESS		1	3.3 STREE	T ADDRESS	,	
CITY-ST-ZIP			3.4. CITY-1	ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME			4. 2 NAME	1		
STREET ADDRESS			4.3 STREE	TADDRESS		
CITY-ST-ZIP	<u> </u>		4.4 CITY-S	T-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME	ſ		
STREET ADDRESS			5.3 STREE	TADDRESS		
CITY-ST-ZIP			5.4 CΠY-S	it-zip		
TITLE		□ DELETE	6.1 TITLE		Change CAddition	
NAME	·	·	6.2 NAME	ļ		
STREET ADDRESS			6.3 STREE	T ADDRESS		
				- 1		

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 phanged, or on an attachment with an address, with all other like empowered.

850 863-9612