

CAPITAL CONNECTION

850 222 1222

09/08 '98 15:08 NO.660 02/02

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

PROFIT
CORPORATION
ANNUAL REPORT
1998FLORIDA DEPARTMENT OF STATE
Tallahassee, FL
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000051350

Corporation Name
Glenn Wright Construction & Development, Inc.

98 SEP -9 PM 3:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDAPrincipal Place of Business
101 SE 21 Street
Ft. Lauderdale, FL 33316
Mailing Address
101 SE 21 Street
Ft. Lauderdale, FL 33316

DO NOT WRITE IN THIS SPACE

1. Principal Place of Business		2. Mailing Address		3. Date Incorporated or Qualified 6/9/97	
4. SUTS. APT. #, etc.		5. SUTS. APT. #, etc.		6. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
7. City & State		8. City & State		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May be Added to Fee	
10. Zip		11. Zip		12. This corporation owes or has paid the current year franchise Personal Property Tax due June 30. ☐ Yes ☐ No	
13. Name and Address of Current Registered Agent		14. Name and Address of New Registered Agent		15. Name and Address of New Registered Agent	
16. Wright, Patricia K. 101 SE 21 Street Fort Lauderdale, FL 33316		17. Name		18. Street Address (P.O. Box Number is Not Acceptable)	
		19. City		20. State	

16. Pursuant to the provisions of Sections 607.0202 and 607.1808, Florida Statutes, the above-named corporation attests 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 this appointment as registered agent. I am familiar with, and accept, the obligations of Section 607.0203, Florida Statutes.

SIGNATURE

OFFICERS AND DIRECTORS		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1998	
1. TITLE	2. NAME	3. TITLE	4. NAME
5. STREET ADDRESS	6. CITY-ST-ZIP	7. STREET ADDRESS	8. CITY-ST-ZIP
9. TITLE	10. NAME	11. STREET ADDRESS	12. CITY-ST-ZIP
13. TITLE	14. NAME	15. STREET ADDRESS	16. CITY-ST-ZIP
17. TITLE	18. NAME	19. STREET ADDRESS	20. CITY-ST-ZIP
21. TITLE	22. NAME	23. STREET ADDRESS	24. CITY-ST-ZIP
25. TITLE	26. NAME	27. STREET ADDRESS	28. CITY-ST-ZIP
29. TITLE	30. NAME	31. STREET ADDRESS	32. CITY-ST-ZIP
33. TITLE	34. NAME	35. STREET ADDRESS	36. CITY-ST-ZIP
37. TITLE	38. NAME	39. STREET ADDRESS	40. CITY-ST-ZIP
41. TITLE	42. NAME	43. STREET ADDRESS	44. CITY-ST-ZIP
45. TITLE	46. NAME	47. STREET ADDRESS	48. CITY-ST-ZIP
49. TITLE	50. NAME	51. STREET ADDRESS	52. CITY-ST-ZIP
53. TITLE	54. NAME	55. STREET ADDRESS	56. CITY-ST-ZIP
57. TITLE	58. NAME	59. STREET ADDRESS	60. CITY-ST-ZIP
61. TITLE	62. NAME	63. STREET ADDRESS	64. CITY-ST-ZIP
65. TITLE	66. NAME	67. STREET ADDRESS	68. CITY-ST-ZIP
69. TITLE	70. NAME	71. STREET ADDRESS	72. CITY-ST-ZIP
73. TITLE	74. NAME	75. STREET ADDRESS	76. CITY-ST-ZIP
77. TITLE	78. NAME	79. STREET ADDRESS	80. CITY-ST-ZIP
81. TITLE	82. NAME	83. STREET ADDRESS	84. CITY-ST-ZIP
85. TITLE	86. NAME	87. STREET ADDRESS	88. CITY-ST-ZIP
89. TITLE	90. NAME	91. STREET ADDRESS	92. CITY-ST-ZIP
93. TITLE	94. NAME	95. STREET ADDRESS	96. CITY-ST-ZIP
97. TITLE	98. NAME	99. STREET ADDRESS	100. CITY-ST-ZIP

16. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 198.07(1)(b), Florida Statutes. I further certify that the information is correct on the annual report or supplemental annual report to true and accurate data that my signature does have the same legal effect as if made under oath; that I am an officer or director of the corporation or the registered agent or authorized 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 appointment with an address.

SIGNATURE:

Signature of Patricia K. Wright
 Signature of Glenn B. Wright, Jr.

9/8/98

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*****8.75 *****8.75