

CAPITAL CONNECTION

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**PROFIT
CORPORATION
ANNUAL REPORT
1999**



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

DOCUMENT # P97000061783

1. Corporation Name

Emory Construction Company, Inc.

FILED

99 AUG 16 PM 2:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

8665 Pinetree Drive North
Seminole, FL 33772

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

2. Principal Place of Business		2a. Mailing Address		4. FBI Number 59-3459347		Applied For Not Applicable	
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
22. City & State		27. City & State		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
23. Zip		28. Zip		8. This corporation owes the current year intangible Personal Property Tax. ☐ Yes ☐ No			
24. Country		29. Country		30. Country			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
Lombardi, Rita A 13642 Serena Drive Largo, FL 33774				81. Name			
				82. Street Address (P.O. Box Number is Not Acceptable)			
				83. City			
				84. 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.

Rita A. Lombardi

August 11, 1999

SIGNATURE

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

(NOTE: Registered Agent Signature required when transferring)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	President-Director
NAME	Montie, Christopher J	1.2 NAME	Montie, Christopher J.
STREET ADDRESS	8665 Pinetree Drive North	1.3 STREET ADDRESS	8665 Pinetree Drive North
CITY-ST-ZIP	Seminole, FL 33772	1.4 CITY-ST-ZIP	Seminole, FL 33772
TITLE	S	2.1 TITLE	
NAME	Lombardi, Rita A	2.2 NAME	100002964241--9
STREET ADDRESS	13642 Serena Drive	2.3 STREET ADDRESS	-08/19/99--01039--007
CITY-ST-ZIP	Largo, FL 33774	2.4 CITY-ST-ZIP	*****61 25 *****
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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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: *Rita A. Lombardi* Rita A. Lombardi 8/11/99 (727) 725-8089