

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

001278

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90181 033 ***150.00

DOCUMENT # P97000064714

1. Corporation Name

THE WINTER CONSTRUCTION COMPANY OF FLORIDA



Principal Place of Business

1900 EMERY ST. NW. STE. 300
ATLANTA GA 30318

Mailing Address

1900 EMERY ST. NW. STE. 300
ATLANTA GA 30318

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/25/1997

4. FEI Number

59-3468380

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 the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21 1330 Spring St. NW
Suite, Apt. #, etc.

2a. Mailing Address

26 1330 Spring St. NW
Suite, Apt. #, etc.

23 City & State

Atlanta GA
Zip Country

27 City & State

Atlanta GA
Zip Country

24 30309-2810 25 USA

29 30309-2810 30 USA

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 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.

(NOT E: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ST ☐ DELETE

NAME DURKIN, SEAN
STREET ADDRESS 1900 EMORY ST, NW, SUITE 300
CITY-ST-ZIP ATLANTA GA 30318

TITLE CPD ☐ DELETE

NAME SILVERMAN, ROBERT L.
STREET ADDRESS 1900 EMORY ST, NW, SUITE 300
CITY-ST-ZIP ATLANTA GA 30318

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

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 ST ☒ Change ☐ Addition

1.2 NAME Durkin, Sean
1.3 STREET ADDRESS 1330 Spring St NW
1.4 CITY-ST-ZIP Atlanta GA 30309-2810

2.1 TITLE CPD ☒ Change ☐ Addition

2.2 NAME Silverman, Robert L.
2.3 STREET ADDRESS 1330 Spring St NW
2.4 CITY-ST-ZIP Atlanta GA 30309-2810

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)