

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000073043 (6)

1. Corporation Name

MARQUEZ LUMBER, INC.

Principal Place of Business

1864 SOUTH HWY. 17
POMONA PARK FL 32181

Mailing Address

P.O. BOX 275
POMONA PARK FL 32181

FILED

98 NOV 18 AM 9:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/14/1997

4. FEI Number

58-2415856

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

9. Name and Address of Current Registered Agent

STIDHAM, DANNY
1864 SOUTH HWY. 17
POMONA PARK FL 32181

10. Name and Address of New Registered Agent

81 Name

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

83

300002698333-5

84 City

-12/01/98-01012-020

***558.75 FL ***558.75

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 Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME ANDERSON, DAVID
STREET ADDRESS P.O. BOX 275 (NA)
CITY-ST-ZIP POMONA PARK FL 32181

TITLE ☐ DELETE

NAME MARQUEZ, ELCO
STREET ADDRESS P.O. BOX 275
CITY-ST-ZIP POMONA PARK FL 32181

TITLE ☐ DELETE

NAME STIDHAM, DANNY
STREET ADDRESS P.O. BOX 275
CITY-ST-ZIP POMONA PARK FL 32181

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 ~~Vice President~~ V-President ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 4016 Diane Dr.
1.4 CITY-ST-ZIP Waycross, Ga. 31503

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME Elco Marquez
2.3 STREET ADDRESS 1164 N. Highway 17
2.4 CITY-ST-ZIP Destin, Fl. 32177

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME Danny Stidham
3.3 STREET ADDRESS 1864 S. Highway 17
3.4 CITY-ST-ZIP Pomona Park, Fl. 32181

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.

SIGNATURE: *[Signature]* **RE REQUIRED**

11/31/98

904-328-9400

CR2E034 (10/97)