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 # P97000073879 (3)

MICHAEL E. MEDDERS CONTRACTORS, INC.

FILED Feb 09 1998 8:00am Secretary of State

| Principal Place of Business Mailing Address | | | | | | | | | | - | ONE CONTRACTOR | | | END TOTAL | |
|---|--|----------------------|---------------------------------|-----------------|-----------------------|--------------------|------------|---|--|--|-----------------------------------|------------|---------------|--------------|-----------|
| | | | | | 3492 GUERNSEY CO | 92 GUERNSEY COURT | | | | | | | | | |
| JACKSONVILLE FL 32226 | | | | | JACKSONVILLE FL 32226 | | | | | | | | | | |
| | | | | | | | | | | | RITE IN THIS | SPACE | | | |
| | | | | | | | | | | 3. Date Incorporated or Qualit | iea | | | | |
| 2. | Principal P | lace of Busin | ness | 20. | 2a. Mailing Address | | | | | 08/25/1997 4. FEI Number Applied For | | | | | |
| 21 |] | | | | 26 | | | | | 59-346238 | 2 | - | - | t Applicabl | - e |
| | Sulte, Apt. #, etc. | | | | Suite, Apt #, etc. | | | | - | | | \$8. | | Additional | ᅴ |
| 22 | 2 | | | 27 | 27 | | | | | 5. Certificate of Status Desired | ; U | F | ee Re | quired | İ |
| | City & State | | | | City & State | | | | | 6. Election Campaign Financia | ng | \$5 | .00 | May Be | ٦ |
| 23 | | | | | 28 | | | | | Trust Fund Contribution | | Ac | ded 1 | o Fees | 4 |
| _ | Zip | — | | | Zip Cour | | | ′ | | 8. This corporation owes or he | | | | | |
| 24 | 24 25 29 30 30 9. Name and Address of Current Registered Agent | | | | | | | | | Personal Property Tax due 10. Name and Address of Nev | | Yes | |] No | - |
| | | | | pitt negisi | torou Agent | 81 | Nan | ne | IV. Harrie and Address Of Har | v nogistereu : | Agent | | | ┥ | |
| MEDDERS, MICHAEL E 3492 GUERNSEY COURT | | | | | 6 | | | | | | | | | | |
| JACKSONVILLE FL 32228 | | | | | | | | Stre | et Addre | ss (P.O. Box Number is Not Acce | eptable) | | | | |
|] | VA | CNOVITEIL | LE PL 92220 | | | | 83 | | | | | | | | \dashv |
| | | | | | | | | <u> </u> | | | | | | | ╛ |
| 1 | | | | | | | 84 | City | • | | FL | 85 | Zip (| Code | |
| 11. | Pursuant | to the provisi | ions of Sections 607.0 | 502 and 60 | 07.1508, Florida St | atutes, the a | pove | e-nam | ed corpo | ration submits this statement for | the purpose of | chang | ing it | s registered | ╢ |
| | office or r | registered ag | ent, or both, in the Sta | te of Floric | da. Such change w | the o | corporatio | oration submits this statement for on's board of directors. I hereby a | ccept the app | ointme | nt as | registered | | | |
| ı | | in in againment with | in, and accept the opi | ·Banona or | , 0000001 007.0000 | , 1 101104 010 | ano c | J. | | | | | | | |
| 510 | ANATURE | Signature, typed | or printed name of registered t | igent and litte | if applicable (| NOTE: Registers | d Age | ent signa | dure required | d when rainstating) | DATE | | | ····· | |
| 12, | | | OFFICERS A | ND DIREC | | 13. | | | | ADDITIONS/CHANGES TO C | FFICERS AND | | | | |
| TITLE | | PSTD | DA 1804415 G | | ☐ DELETE | 1.1 ī | TLE | | | | | ∐ Chi | ange | | ٦ ز |
| NAM | | | RS, MICHAEL E | | | 1.2 N | AME | | | | | | | | |
| STRE | EET ADORESS | | UERNSEY COURT | | | 1.3 S | TREET | ADDRE! | SS | | | | | | |
| - | '-ST-ZIP | | ONVILLE FL 32226 | | DELETE. | | | T-ZIP | | | | T 05 | | A Zare - | 4 |
| TITL | | VD | RICHARD | | ☐ DELETE | 2.1 T | | | 1 | | | Cha | ange | Addition | ֿן ' |
| NAM | | | SATTLER ROAD | | | 2.2 N | | | _ | | | | | | 1 |
| 1 . | ET ADORESS | | ONVILLE FL 32226 | | | | | ADDRES | SS | | | | | | |
| TITLE | -ST-ZIP | UNUNG | NAME LE SESSO | | DELETE | 2.40 3.1 T | | ST - ZIP | - | | | Cha | Anna | Addition | \exists |
| NAM | | | | | L. Detell | 3.1 I | | | | | | | พหน | LJ AUGITO | |
| l | STREET ADDRESS | | | | | 3.3 STREET ADDRESS | | 25 | | | | | | | |
| ľ | CITY-ST-ZIP | | | | 3.4. CI | | | | ~ | | | | | | |
| TITLE | | | ··· | | DELETE | 4.1 T | | el- Ell | | | · · · · · · · · · · · · · · · · · | Cha | inge | Addition | \forall |
| NAM | 1 | | | | | 4.2 } | | | | | | | - | | |
| | STREET ADDRESS | | | 4.3 5' | | 4.3 STREET ADDRESS | | s l | | | | | | | |
| CITY-ST-ZIP | | | | | 1 | 4.4 CITY-ST- | | | | | | | | | |
| TITLE | | | | | ☐ DELETE | 51 T | | | <u> </u> | | | ☐ Chá | inge | Addition | 7 |
| NAM | NAME | | | | | 52 N | 52 NAME | | 1 | | | | | | 1 |
| STRE | ET ADDRESS | | | | | 5.3 S | TREET | ADDRES | s | | | | | | |
| CITY | -ST-ZIP | | | | | 54C | ITY-S | 1 - ZIP | | | | | | | |
| TITLE | [| | | | DELETE | 61 T | TLE | | | | | ☐ Cha | nge | Addition | 1 |
| NAM | E | | | | | 6.2 N | AME | | | | | | | | |
| STRE | ET ADDRESS | | | | | 6.3 S | TREET | ADDRES | ss | | | | | | |
| | -ST-ZIP | | | | | | ITY-S | | | | | | | | |
| 14. | Lhereby c | ertify that the | information supplied | with this h | ling does not qualif | v for the exi | empl | lion st | ated in Se | ection 119 07(3)(i), Florida Statute | es. I further ce | tity the | it the | information | ì |

Intereory certify trial the information supplied with this hing does not quality for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further certify that the informatic 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 trusted 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.