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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000076173 (8)

DOUGLAS AND DOUGLAS CONSTRUCTION COMPANY, INC. Principal Place of Business Mailino Address

**FILED** 

Mar 12 1998 8:00am

Secretary of State

ROUTE 2 BO STARKE FL 32		ROUTE 2 BOX 1805 STARKE FL 32091			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  09/15/1997
L	ace of Business	2a. Mailing Address			4. FEI Number Applied For
21 SAME	AS ABOVE	26 SAME AS A	80 i	15	<b>59-3467655</b> Not Applicable
Suite, Apt. 4	, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State		City & State		•	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country 25	7 ip Co	ountry	i	8. This corporation owes or has paid the current/year Intangible Personal Property Tax due June 30.  Yes No
	9. Name and Address of Currel		I		10. Name and Address of New Registered Agent
HARDY, DUDLEY P 998 NORTH TEMPLE AVENUE STARKE FL 32091			81 82 83	Street Add	dress (P.O. Box Number is Not Acceptable)
			84	City	FL 85 Zip Code
SIGNATURE	Signature typical or printed name of registered ap OFFICERS AN DOUGLAS, WAYNE ROUTE 2 BOX 1805 STARKE FL 32091	pent rived title if applicable (NOTE Register  (ID DIRECTORS 13  DELETE 1.1  1.2  1.3  1.4	red Age TITLE NAME STREET	ent signature requi	poration submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered    DATE   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12   Change   Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D DOUGLAS, WAYNE E JR. ROUTE 2 BOX 1805 STARKE FL 32091	2.21 2.3: 2.4 DELETE 3.1		T ADDRESS ST-ZIP	Change Addition  Change Addition
STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS		3.4. DELETE 4.1 4.2	CITY- TITLE NAME	T ADDRESS ST-ZIP T ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	••	DELETE 5.1 5.2 5.3	TITLE NAME	1 ADDRESS	Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		DELETE 61 62	TITLE NAME		Change Addition

14. I hereby certify that the information supplied with this filing cloes 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 suppliemental 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

904-964-6593