

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # P97000084906

1. Corporation Name

WEST CONSTRUCTION & DEVELOPMENT, INC.

Principal Place of Business

730 E TENNESSEE ST
TALLAHASSEE FL 32308

Mailing Address

730 E TENNESSEE ST
TALLAHASSEE FL 32308

2. Principal Place of Business

21 1210 MITCHELL AVENUE

2a. Mailing Address

26 1210 MITCHELL AVENUE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 TALLAHASSEE, FL

City & State

28 TALLAHASSEE, FL

Zip

Country

24 32303

25 USA

Zip

Country

29 32303

30 USA

9. Name and Address of Current Registered Agent

WEST, JUDD L
730 E TENNESSEE ST
TALLAHASSEE FL 32308

3. Date Incorporated or Qualified

10/01/1997

4. FEI Number

59-3471000

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

10. Name and Address of New Registered Agent

81 Name

WEST, JUDD L.

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

1210 MITCHELL AVENUE

83

84 City

TALLAHASSEE

FL

85 Zip Code

32303

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

Judd L. West
Signature typed or printed name of registered agent and title if applicable.

JUDD L. WEST (PRESIDENT)

01/27/99

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME WEST, JUDD L

STREET ADDRESS 730 E TENNESSEE ST

CITY-ST-ZIP TALLAHASSEE FL 32308

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

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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

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☒ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

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☐ Change

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☐ Change

☐ Addition

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:

Judd L. West
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Feb 27, 1999 8:00 am
Secretary of State

02-27-1999 90066 030 ***158.75



DO NOT WRITE IN THIS SPACE

CR2E034 (11/98)