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 # P9700088001 (7)

FILED Feb 16 1998 8:00am Secretary of State

GARY	THE CARPENTER CONSTR	UCTION, INC.		
Principal Place of Business Mailing Address				t habither the toll delit abilt delit eath eath eath eath eath eath eath eat
		1920 FOGARTY AVE. KEY WEST FL 33040		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				10/13/1997
	Place of Business	2a. Mailing Address		4. FEI Number Applied For
Suite, Apt. #, etc		Suite, Apt. #, etc.		(65-078631) Not Applicable
-		27]		5. Certificate of Status Desired See Required
		City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Ζιρ	Country	Žφ	Country	8. This corporation owes or has paid the current year Intangible
24	25	29	30	Personal Property Tax due June 30. Yes No
····- <u>-</u>	9. Name and Address of Current	Registered Agent	81 Na	10. Name and Address of New Registered Agent
DOROFIELD, GANT				
1920 FOGARTY AVE.			B2 Stre	reet Address (P.O. Box Number is Not Acceptable)
KEY WEST FL 33040			83	
!			ļ_ 	
			84 Cit	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	utes, the above-nan	
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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.				
			torios otatatos.	
SIGNATURE	Stocature, typical or precied packs of registered ages	Lacet Olic Capple Jobs (NC	ITE Registered Agent sign	gnature required when reinstating) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TALE	Daresident / Secretar	9 DELETE	1.1 TITLE	Change Addition
NAME	BURCHFIELD, GARY 1920 FOGARTY AVE.		1.2 NAME	
STREET ADDRESS	KEY WEST FL 33040		1.3 STREET ADDRE	
CITY-ST-ZIP TITLE	Vice President	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	Change Addition
NAME	Harold E. Goudley Siz		2.2 NAME	
STREET ADDRESS	819 Peacock Plz Suite	574	2.3 STREET ADDRE	RESS
CITY-ST-ZIP			2.4 CITY+ST-ZIP	
TOLE	Key West, Fl. 33040 Assistant Vice Presi	dent DELEVE	3.1 TITLE	☐ Change ☐ Addition
NAME	Blean perry 1108 Petrois st.		3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRE	RESS
CITY-ST-ZIP	Key West, F1. 33040		3.4. CITY-ST-ZIP	
TITLE	'	☐ DELETE	4 1 TITLE	Change L Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRE	
CITY-ST-ZIP TITLE		DELFTE	4.4 CITY-ST-ZIP 5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS	\		5.3 STREET ADORE	255
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE	<u> </u>	DELETE	6.1 TITLE	Change Addition
NAME		•	6.2 NAME	
STREET ADDRESS			6.3 STREET ADORE	RESS
CITY-\$7-ZIP			64 CITY-ST-ZIP	
	certify that the information supplied wi	h this filing does not qualify		stated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information by signature shall have the same legal effect as if made under path; that I am an

4. I heroby 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 true of empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Placet 13 if chapter 607, and the properties of the corporation of the receiver of the corporation of the corporation of the corporation.

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SARY BURCHELL 1/14/98 305291202