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Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90054 013 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # P97000090908

1. Corporation Name

DOBSON CONTRACTING, INC.

Principal Place of Business

13170-58 ATLANTIC BLVD., STE. 188
JACKSONVILLE FL 32225-4151

Mailing Address

13170-58 ATLANTIC BLVD., STE. 188
JACKSONVILLE FL 32225-4151

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/20/1997

4. FEI Number

59-3475450

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

2. Principal Place of Business

21 3165 St. Johns Bluff Rd S

2a. Mailing Address

26 3165 St Johns Bluff Rd S.

Suite, Apt. #, etc.

22 Suite 8

Suite, Apt. #, etc.

27 Suite 7

City & State

23 Jacksonville FL

City & State

28 Jacksonville, FL

Zip

24 32246

Country

25 Duval

Zip

29 32246

Country

30 Duval

9. Name and Address of Current Registered Agent

DOBSON, E. SIDNEY
5977 LORAN DRIVE NORTH
JACKSONVILLE FL 32216

10. Name and Address of New Registered Agent

81 Name

Dobson, Sidney Randolph

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

1233 Bay Breeze Drive

83

84 City

Jacksonville

FL

85

Zip Code

32223

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

Sidney R. Dobson
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3-19-99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME P
STREET ADDRESS DOBSON, SIDNEY E
CITY-ST-ZIP 5977 LORAN DRIVE N.
JACKSONVILLE FL 32216

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
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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 President ☒ Change ☐ Addition
1.2 NAME Dobson, Sidney Randolph
1.3 STREET ADDRESS 1233 Bay Breeze Drive
1.4 CITY-ST-ZIP Jacksonville FL 32223

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

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 in an attachment with an address, with all other like empowered.

SIGNATURE:

Sidney R. Dobson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-19-99

Date

(904) 997-9000

Daytime Phone #

CR2E034 (1/1/98)