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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P97000097384**1. Corporation Name

NEUDECK CONSTRUCTION. INC.

	,, , , , , , , , , , , , , , , , , , , ,									
Principal Place of Business Mailing Address							- 118811431 (18 1811) 1881) 98111 38111	141 88118 1811	11 1 <b>00 00</b> 141	(\$1 (\$1)) BIEI (\$2)
12412 FLYNN ROAD JACKSONVILLE FL 32223  12412 FLYNN ROAD JACKSONVILLE FL 32223							DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualifed 11/12/1997			
Principal Place of Business     2a. Mailing Address							4. FEI Number			Applied For
21 26							59-3479057			Not Applicable
Suite, Apt.	#, etc.	27	Suite, Apt. #, etc.				5. Certifcate of Status Desired	]		Additional Required
City & Stat	е		City & State				6. Election Campaign Financing Trust Fund Contribution	]		<b>0</b> May Be d to Fees
Zip	Country Zip			Country			8. This corporation owes the current	year Intan	gible	
24	25 29			30			Personal Property Tax.		Yes	□No
<del></del>	9. Name and Address of Curr	ent Registe	red Agent				10. Name and Address of New Regi	stered A	gent	
				8	31	Name				
NEUDECK, RUSSELL E					32	Stroot Addre	ess (P.O. Box Number is Not Acceptable)	٠		·
12412 FLYNN ROAD					"	Street Addre	iss (1.0. box Humber is Hot / tooptable)	,		
JACKSONVILLE FL 32223					33					
			- ¥	ļ.,	_			<u> </u>	(a=1 3:	- 6-4-
			,	8	34	City -	1	FL	<b>85</b>   Zi	p Code
office or r	to the provisions of Sections 607.0 egistered agent, or both, in the Stam familiar with, and accept the obli	e of Florida	. Such change was autr	norizea t	וז עם	named corpo he corporation	ration submits this statement for the pur n's board of directors. I hereby accept th	pose of che e appoint	nanging ment as	its registered registered
SIGNATURE	Signature, typed or printed name of registered a	gent and title if	applicable (NOTE: Re	egistered A	gent	signature required	when reinstating)	DATE		<del></del>
12. OFFICERS AND DIRECTORS							ADDITIONS/CHANGES TO OFFICE	ERS AND	DIREC	TORS IN 12
TITLE	D		☐ DELETE	1.1 TITL	E				Chang	
NAME	NEUDECK, RUSSELL E			1.2 NAM	Æ		•			
STREET ADDRESS				1.3 STRI	EET /	ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL 32223			1.4 CITY-ST-ZIP		-ZIP				
TITLE	O/ IO/ IO/ IO/ IO/ IO/ IO/ IO/ IO/ IO/ I		☐ DELETE	2.1 TITL	E				Chang	e Addition
NAME				2.2 NAM	Æ					
STREET ADDRESS				2.3 STR	EET/	ADDRESS				
CITY-ST-ZIP				2. 4 CIT	Y-ST	r- 7IP				
TITLE			DELETE	3.1 TITL					Chang	je 🗌 Addition
NAME				3.2 NAM						
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP				3.4. CIT	Y-ST	-ZIP				

Y-ST-ZIP 6.4 CI 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 on an attachment with an address, with all other like empowered.

6.2 NAME

4.1 TITLE

4 2 NAME

5.1 TITLE

5.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

☐ DELETE

☐ DELETE

☐ Change

Change

☐ Change

Addition

Addition

Addition