05-06-1999 90186 050 ***150.00

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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000038436

1. Corporation Name

Principal Place of Business

MILLENNIUM BUILDING & REMODELING, INC.

8808 TURKEY B NAVARRE FL 32		8808 TURKEY BLUFF ROAD NAVARRE FL 32566					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 04/27/1998			
2 Principal D	lace of Business	2a. Mailing	Address			_	4. FEI Number		1 14	Applied For
—	ace or business	`	26				59-3515	360	——	Not Applicable
21 [Suite, Apt.	# etc		Suite, Apt. #, etc.							Additional
odile, Apt.	#, U.G.		27				Certificate of Status Desir	ed 🗍		Required
City & State			City & State				6. Election Campaign Finar	ecina .	\$5.0	May Be
23		28	¬ '				Trust Fund Contribution Added to Fees			
Zip				Countr	y	8. This corporation owes the current year Intangible				
24	25 29 30					Personal Property Tax.				
	9. Name and Address of Curren						10. Name and Address of I	New Registered A	gent	
Turner, Sherri e					Name	e				
					Ctron	t Addros	Address (P.O. Box Number is Not Acceptable)			
8808 TURKEY BLUFF ROAD NAVARRE FL 32566				82	Siree	I Addres	duress (F.O. Box Number is Not Acceptable)			
				83	1					
					0:5:			 	85 Zig	Code
				84				FL		
office or re agent. I as SIGNATURE	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such tions of, Section	change was author 607.0505, Florida S	ized by Statute:	the cors.	poration.	s board of directors. I nereby	accept the appoin	iment as	registered
	Signature, typed or printed name of registered ager			tered Age	ent signature	e required w	then reinstating) ADDITIONS/CHANGES T	Bille	D DIRECT	ORS IN 12
12.	OFFICERS AN	ID DIRECTORS	<u></u>	13.		P	ADDITIONS/CHANGES 1	O OI I ICENS AND	Change	
TITLE			_	.2 NAME			even M. Tebo	•		
NAME					TADDRES	. 00	10 Tuellan 01	EG 600	1	
STREET ADDRESS						000	18 / Writeg Bi	37 61-10	9	Ì
CITY-ST-ZIP				.4 CITY-:	51-ZP	177	SIT	32366	[7] Chang	Addition
TITLE) been			2.2 NAME		1/	3// 		_ ,	
NAME					T ADDRES	2h	erri E, lur	NER	2.4.0	ļ
STREET ADDRESS				2. 4 CITY-		~\ & & &	erri E. Tur 08 Turkey B TYARRE, EL	37 5/1/2	COAD	
TITLE				3.1 TITLE	31-ZIF	INT	IVNERE, FL	22 200	Chang	e Addition
NAME			_	3.2 NAME					_	
STREET ADDRESS					T ADDRES	s				į
CITY-ST-ZIP				3.4. CITY-		~ <u> </u>				
TITLE		····		LI TITLE	O. 2				☐ Chang	e Addition
NAME				. 2 NAME						
STREET ADDRESS				1.3 STREE	T ADDRES	s				
CITY-ST-ZIP			1.	I.4 CITY-	ST-ZIP					
TITLE				5.1 πr.E					☐ Chang	e 🔲 Addition
NAME			1	5.2 NAME						
STREET ADDRESS			[;	5.3 STREE	T ADDRES	is				
CITY-ST-ZIP				5.4 CITY-	ST-ZIP					
TITLE		· · · · · · · · · · · · · · · · · · ·	☐ DELETE	3.1 TITLE					Chang	e
1141 AF			l i	3.2 NAME						

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

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS