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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 # P98000058331

1. Corporation Name

COY A.	CLARK CONSTRUCTION CO	RP.									
Principal Place	of Rusiness	Mailing A	ddress				l	\$ 100{100£1 110 30109 \$0911 0	JIJ BOLKI ODAN QI	BIOL OTIŠE INION ITION I	
		-									
575 S. WICKHAM ROAD 575 S. WICKHAM ROAD SUITE E											
W. MELBOURNE FL 32904 W. MELBOURNE FL 32904									WRITE IN T	HIS SPACE	·
							0	ate Incorporated or Qua 6/30/1998	llifed 		
2. Principal Pl	ace of Business	2a. Mailin	g Address				4. FI	El Number	10	<u> </u>	lied For
21		26						59-35/961	<u>'O</u>		Applicable
Suite, Apt.	#, etc.	Suite,	Apt. #, etc.				5. C	ertifcate of Status Desir	ed 🗆	\$8.75 Ac Fee Req	
City & State	9	City &	State			1	6. E	lection Campaign Finan	cing	\$5.00 h	May Be
23		28					Tı	rust Fund Contribution	لبا	Added to	Fees
Zip	Country	Zip		Cou	ntry			his corporation owes the	e current year		·
24	25	29		30				ersonal Property Tax.			□No
	9. Name and Address of Current	Registered A	Agent		od N		10. N	lame and Address of N		ed Agent	
DETTMER, DALE A					81 Name	<u> </u>	Y	A CURRI			
304 S. HARBOR CITY BLVD.					82 Stree	57 S	dress (P.O. Box Number is Not Acceptable)				
SUITE 201					83	S.a.	VITE E				
MELBOURNE FL 32901								TEBOUR		85 Zip C	ode 904
	to the provisions of Sections 607.0502	+ CO7 1501	9. Flasida Statut	on the el		ر میں م	etion e	ubmite this statement for	r the numose		
office or r	egistered agent, or both, in the State on familiar with, and accept the obligation	f Florida, Suci	h change was a	utnorized	DV the cor	poration	's boar	d of directors. I hereby	accept the ap	ppointment as reg	istered
SIGNATURE	Signature, typed or printed partie of registered agent	and title if applicab	ile. (NOTE	Registered	Agent signatur	Pale o			/ 8/98 BATE		
12.	OFFICERS AND	DIRECTOR		13.		1 -		DITIONS/CHANGES.T	OFFICERS		
TITLE	D		☐ DELETE	1.1 711	ILE	Ps	~	حد فيسترشش و	المستشيد	Change	☐ Addition
NAME	CLARK, COY A			1.2 NA	WE	Co	→ F	y cúaric Si wichena	8	AA. (18)	_
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NAME				3.2 NA							
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TITLE				5.1 N						g•	
NAME					REET ADDRES	s					Į
STREET ADDRESS					TY-ST-ZIP	-					1
CITY-ST-ZIP			☐ DELETE	6.1 TI		+				☐ Change	Addition
TITLE				6.2 NA						_ •	_
NAME					REET ADDRES	s					j

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 suppliemental 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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP