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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000091361

1. Corporation Name

SAND HILLS CONSTRUCTION, INC.

FILED Mar 23, 1999 8:00 am **Secretary of State**

03-23-1999 90067 019 ***150.00



Principal Place of Business Mailing Address 1646 SUNNYHILLS BLVD. 1646 SUNNYHILLS BLVD. SUNNYHILLS FL 32428 SUNNYHILLS FL 32428 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 10/26/1998 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 16465 uning Hills Blod Not Applicable 26 1646 Sunnu Hills \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State 6. Election Campaign Financing \$5.00 May Be City & State Εl Sunny Hills Added to Fees Trust Fund Contribution 28 Country This corporation owes the current year Intangible usA 32428 Personal Property Tax. us A-25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name PARKER, BOBBY J Street Address (P.O. Box Number is Not Acceptable) 1646 SUNNYHILLS BLVD. SUNNYHILLS FL 32428 83 84 Zip Code City 85 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) CR2F034 (11/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 DELETE 1.1 TITLE ☐ Change ☐ Addition TITLE Bobby J Panke. 12 NAME NAME 16465 anns 1245 1.3 STREET ADDRESS STREET ADDRESS 32428 1.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ DELETE 2.1 TITLE TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34 CITY-ST-ZIP CITY-ST-ZIP Addition Change ☐ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP □ DELETE ☐ Change ☐ Addition 5.1 TITLE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Addition □ DELETE [] Change TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

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

6.4 CITY-ST-ZIP

SIGNATURE: