

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 22 AM 8:19

DOCUMENT # S02957 (6)

1. Corporation Name

ASSOCIATED CONTRACTORS OF WEST COAST FLORIDA, IN
C.

Principal Place of Business

P.O. BOX 16661
ST. PETERSBURG FL 33733

Mailing Address

P.O. BOX 16661
ST. PETERSBURG FL 33733

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/25/1990

3a. Date of Last Report

06/21/1994

4. FEI Number

59-3024384

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

7. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 P.O. Box 76224

2a. Mailing Address

26 P.O. Box 76224

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 ST. PETERSBURG, FL

27 City & State

28 ST. PETERSBURG, FL

24 Zip

25 33734

29 Zip

30 33734

26 PINELLAS

31 PINELLAS

8. Name and Address of Current Registered Agent

DEHUT, MARK A.
1518 KENWOOD AVE N
ST. PETERSBURG BEACH FL 33704-0156

10. Name and Address of New Registered Agent

81 Name DEHUT, MARK A.
82 Street Address (P.O. Box Number is Not Acceptable)
1518 KENWOOD AVE
83
84 City ST. PETERSBURG FL 85 Zip Code 33704

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
	OLSON, DAVID	6400 22ND ST. S.	ST. PETERSBURG FL 33705
	NELSON, ROBERT	3546 6TH AVE. N.	ST. PETERSBURG FL 33713
	PARKER, JOHN E	3546 6TH AVE. N.	ST. PETERSBURG FL
	DE HUT, MARK A	1518 KENWOOD AVE. N.	ST. PETERSBURG FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP	Change	Addition
	OLSON, DAVID	6400 22ND ST. S.	ST. PETERSBURG FL 33705	☒	☐
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY - ST - ZIP	Change	Addition
	NELSON, ROBERT	3546 6TH AVE N	ST. PETERSBURG, FL	☒	☐
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY - ST - ZIP	Change	Addition
	PARKER, JOHN E.	3546 6TH AVE N.	ST. PETERSBURG FL	☒	☐
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY - ST - ZIP	Change	Addition
				☐	☐
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY - ST - ZIP	Change	Addition
				☐	☐
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY - ST - ZIP	Change	Addition
				☐	☐

14. I do hereby certify that the information submitted with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included 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 of this report.

SIGNATURE

DEHUT, MARK A. DEHUT, PD. MAY 2, '95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(941) 463-8911