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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham 🚜

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S088

(8)

**BUILDING ONE COMPANY** 

,

## FILED Feb 17 1998 8:00am Secretary of State



				1,0671,640,014,6400,7040,9101,17,044,644,044	
Principal Place of Business Mailing Address					
P.O. BOX 2		P.O. BOX 2152	4154	]	
KEY WEST FL 33045-2152		KEY WEST FL 33045-	2132	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				10/25/1990	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0347553	Not Applicable
Suite, Apt #, etc		Suito, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional
[22]		27			Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	<b>28</b>	Country	Trust Fund Contribution	
24	25	29	30	Personal Property Tax due June 30.	Yes No
271	9. Name and Address of Current			10. Name and Address of New Registe	
8	POTTSWOOD, JOHN M., JR		81 Name		
	00 FLEMING STREET		82 Street Add	Iress (P.O. Box Number is Not Acceptable)	
	EY WEST FL 33040		Sileer Add	iress (F.O. Box Number is Not Acceptable)	
			83		
			84 City		85 Zip Code
			[]		F <b>L</b> (
11. Pursuant	to the provisions of Sections 607,0502	and 607-1508, Florida Stati	ites, the above-named corp	poration submits this statement for the purpo- tion's board of directors. I hereby accept the	se of changing its registered
agent La	n tamillar with, and accept the divinal	in Fiorida: Stich change was jons of, Section 607,0595, F	lorida Statutes.	mon's board of directors. Thereby accept the	appointment as registered
SIGNATURE	WY ( ) L-)	14ic	hand Woodun	19 Jan	20,1998
	Signature typed or professional of rege to adjugen		)1E Registered Agent signature requ	I/Bd when reinstating) DA	IIE
12.	OLEICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	PD	☐ DELFTE	1.1 TITLE		Change Addition
NAME	WOODRUFF, RICHARD		1.2 NAME		
STREET ADDRESS	11085 ALPHARETTA HWY		1.3 STREET ADDRESS		
CITY-ST-ZIP	ROSWELL GA DS	DETETE	1.4 CITY-ST-ZIP		Change Addition
TETLE	SPOTTSWOOD, JOHN M., JF	<del></del>	21 TITLE		C) Charge C Addition
NAME	500 FLEMING STREET	1.	2.2 NAME		
STREET ADDRESS	KEY WEST FL		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	RET WEST PL	DELETE	2 4 CITY-ST-ZIP 3 1 TITLE		Change Addition
NAME			32 NAME		
STREET ADDRESS			3.3 STHEET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
THILE		DELETE	4.1 TITLE		Change Addition
NAME ]			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6 4 CITY-ST-ZIP		
	certify that the information supplied will	h this filing does not qualify		Section 119.07(3)(i), Florida Statutes. I furthe	er 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 trustice 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 intrictiment with an address.

SIGNATURE:

AND TYPED OTTOGRAPH OF SIGNING OF

nez.

Feb 10, 1998

Davima Phone P