

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **S23509** (0)

1. Corporation Name

MALCO CONSTRUCTION INC.



Principal Place of Business

P O BOX 3087
N FT MYERS FL 33918-0087

Mailing Address

P O BOX 3087
N FT MYERS FL 33918-0087

3. Date Incorporated or Qualified
01/03/1991

3a. Date of Last Report
05/11/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.
22 City & State
23 Zip Country
24

2a. Mailing Address

26 Suite, Apt. #, etc.
27 City & State
28 Zip Country
29

4. FEI Number
65-0238818

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**LUDERS, MICHAEL A.
7760 BARTHOLOMEW DR
FT MYERS FL 33917**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 the corporation

(If not, Registered Agent Signature required check box below)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
P
LUDERS, MICHAEL A.
7760 BARTHOLOMEW DR
FT MYERS FL
DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
V
COOK, CHRISTOPHER W.
7762 BARTHOLOMEW DR NE
N FT MYERS FL
DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
ST
LUNDERS, GARY L.
316 SAN REMO LN
N FT MYERS FL
DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

**ST
AIDEN RUSSELL B.
13401 Fox Chapel Court
FT MYERS FL 33919**

14. I do hereby certify that the information supplied 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 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 on an attachment with an address.

SIGNATURE:

Michael A. Luders Pres. *Michael G. [Signature]* 4/15/96 891-994-1368
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date District Phone #

CR2E034 (12/95)