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PROFIT CORPORATION ANNUAL REPORT

1997

appears in Block 12 or Block

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S34915

(6)

D & C BUILDING MAINTENANCE, INC.

FILED
Apr 28 1997 8:00am
Secretary of State

Principal Praci POST OFFICE I 1191 SAWMILL	BOX 2472 CT.	Mailing Address POST OFFICE BOX 2472 GOLDENROD FL 32733-2472						
WINTER PARK I US	rL 32/82				3. Date Incorporated or Qualified 02/27/1991		ate of Last R	leport
L	lace of Business	2a. Mailing Address		<u> </u>	4. FEI Number			pplied For
21	Anna Anna an	Suite, Apt. #, etc.			59-3051953			ot Applicable
Suite, Apl. #, elc 22		27		5. Certificate of Status Desired	X		Additional equired	
I Citv & State	e	City & State			6. Election Campaign Financing		\$5.00	May Be
23		28	T 05		Trust Fund Contribution			to Fees
Z(p 24	Country 25	Zıp	Countr	У	 This corporation has liability to Florida Statutes 	r intangible 🏻 Yes - 🌡		. 199.032,
24	9. Name and Address of Curren		[30]		10. Name and Address of New F			
DAV	ID HEIDENTHALER		81	Name				
1191	SAW MILL COURT		82	Street Ac	idress (P.O. Box Number is Not Accept	able)		
WIN.	TER PARK FL 32792		83					
			6	'				
			84	City		FL	85 Zip	Code
SIGNATURE	Signature, typed or printed name of registered age	ant and life if applicable (NOT	IE Registered Aç		orporation submits this statement for the ration's board of directors. I hereby accurate when reinstating	DATE		
12.	OFFICERS ANI	D DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFF	ICERS ANI	Change	AS IN 12
TRILE NAME	PTD HEIDENTHALER, DAVID	-		i			L.) Change	I''' VOUIDU
STREET ADDRESS 1191 SAW MILL COURT			1.2 NAME 1.3 STREET ADDRESS					
CITY-ST-ZIP	WINTER PARK FL		1.4 CITY-ST-ZIP					
THTLE	SV	DELETE	2.1 TITLE				Change	Addition
NAME	HEIDENTHALER, CARIDAD		2.2 NAME					
STHEET ADDRESS	1191 SAW MILL COURT WINTER PARK FL	•	2.3 STREET ADDRESS					
CITY - ST - 7/P TOLE	WHITER FANA FL	DELETE	2. 4 CITY- 3.1 TITLE				Change	Addition
NAME			3.2 NAME	1				
STREET ADDRESS			3.3 STREE	T ADDRESS				
CHY-ST-ZIP			3.4. CITY-		· · · · · · · · · · · · · · · · · · ·			
TOTLE		L DELETE	4.1 TITLE				Change	Addition
NAME STREET ADDRESS			4. 2 NAMI	T ADDRESS				
CITY+ST-ZIP			4.4 CITY-					
TIFE		DELETE	5.1 TITLE		14-1-14-14-14-1		Change	Addition
NAME			5.2 NAME					
STREET ADDRESS				ET ADDRESS				
CITY - ST - ZIP		DELETE	5.4 CITY- 6.1 TITLE				Change	Addition
NAME		L DECEME	6.2 NAME				The Oranide	L. Rounter
STREET ADDRESS				T ADDRESS				
City of 30				et 3:0	ı			

14. I do 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 property or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name