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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999	·	1 500 W.
DOCUMENT	# S352	279

FILED Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90126 017 ***150.00

 Corporation 	on Name	-							
FRAME	RIGHT CONSTRUCTION, I	NC.							
							* 10011920 100 JHW: 01416 11011 48010 1031 0101	COLONIA DEBINARRANTA	
					_				
,	ce of Business	Mailing Ad							
955-K PALM V	ALLEY RD. I BEACH FL 32082		I VALLEY RD IRA BEACH FL	32082					
PUNIE VEDRA	BEACH FL 32002	FORTE VEC	MA DEACH IE	JEOUE			DO NOT WRITE IN TH	IS SPACE	
							3. Date Incorporated or Qualifed		
							03/01/1991		
2. Principal F	Place of Business	2a. Mailing	Address				4. FEI Number	 	plied For
21		26					59-3057531		t Applicable
Suite, Apt	#, etc.	— ·	Apt. #, etc				5. Certifcate of Status Desired	\$8.75 A Fee Re	
22	10	27 City &	State				C. Flastica Campaign Flanguing	\$5.00	
City & Sta	ite	28	State				6. Election Campaign Financing Trust Fund Contribution	Added t	
23 Zip	Country	Zip		Counti	ry		8. This corporation owes the current year		
24	25	29		30			Personal Property Tax.	Yes	□No
	9. Name and Address of Curr		gent				10. Name and Address of New Registere	d Agent	
				8	1	Name			
	NTLON, CHRISTOPHER T.			8	2	Street Addr	ress (P.O. Box Number is Not Acceptable)		
	-K PALM VALLEY RD								
PON	NTE VEDRA BEACH FL 32082			8	3				
				8	4	City		85 Zip (Code
				1		•	oration submits this statement for the purpose	L))	
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable	NOTE	Registered Ag		ognature require	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	DPS IN 12
12.	OFFICERS A	AND DIRECTORS	☐ DELETE	13.		i	ADDITIONS/CHANGES TO OFFICERS	Change	Addition
TITLE	CANTLON, CHRISTOPHER T.		- OCCEPT	1.2 NAME					_
NAME STREET ADDRESS	055 1/ 51114 1/114 5/ 55			13 STRE		nneess			
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32	082		14 CITY					
TITLE	DVS		DELETE	2 1 TITLE				Change	Audition
NAME.	CANTLON, CHRISTOPHER T.			2.2 NAME	Ε				
STREET ADDRESS	ASSESSED AND AND AND ADDRESSED ADDRESSED AND ADDRESSED ADDRESSED AND ADDRESSED ADDRESSED AND ADDRESSED AND ADDRESSED AND ADDRESSED AND ADDRESS			23 STRE	ETA	DDRESS			
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32	2082		2 4 GITY	- ST-	ZIP			
TITLE			☐ DELE1E	3 1 TITLE				Change	Addition
NAME				3.2 NAME	Ε	!			
STREET ADDRESS	s			3 3 5 TRE	r: V	ODRESS :			
CITY-ST-ZIP				34 CITY		ZIP		Chongs	- Addition
TITLE			☐ DELETE	: 4 ° T(TLE				[_] Change	Addition
NAME				4 2 NAM					
STREET ADDRESS	S			4 3 STRE					
CITY-S1-ZIP			☐ DELETE	44 CITY- 51 TITLE		ZIP		☐ Change	Addition
TITLE			_ DELETE	5 1 111LE		\downarrow		3*	
NAME				53STRE		DDRESS			
STREET ADDRESS CITY-ST-ZIP	3			5 4 CITY-		ŀ			
TITLE			☐ DELETE	61 TITLE				Change	Addition
NAME				5.2 NAME	Ε				ļ
STREET ADDRESS	s			63STRE	ĘΤΑ	ODRESS			
CITY OF 7ID				64 CITY-	- ST-2	ZIP			

14. 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 charged, or on an attachment with an address, with all other like empowered.

IGNING OFFICER OR DIRECTOR

3-15-99