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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90016 034 \*\*\*150.00

## DOCUMENT # S41645

1. Corporation Name

56 CONSTRUCTION & DEVELOPERS, INC.

30 0014	THOUSAND DEVELOR EN	, iivo							
Principal Place of Business Mailing Address							••••		
125 NORTH BIRCH ROAD 125 NORTH BIRCH ROAD									
STE. 301 STE. 301						DO NOT IMPITE IN THIS SPACE			
FT. LAUDERDALE FL 33304 FT. LAUDERDALE FL 33304				-		DO NOT WRITE IN THIS SPACE			
}						3. Date Incorporated or Qualifed 03/28/1991		<del></del>	
Principal Place of Business     2a. Mailing Address				- 00		4. FEI Number	· A	pplied For	1
			744			65-0260660		ot Applicable	1
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired		Additional	1
27								equired	- ==
City & State			-			6. Election Campaign Financing		May Be	
23 28						Trust Fund Contribution		to Fees	1
Zip	Zip Country Zip Cou					8. This corporation owes the current year Intangible Personal Property Tax ☐ Yes ☐ No			
24	25	29 33310-5744 30				Personal Property Tax.	∐ Yes		-
ļ	9. Name and Address of Current	Registered Agent	81	Name		10. Name and Address of New Registered	Agent		1
DUII	I IDC IOHN E		8'	Name					
PHILLIPS, JOHN F. 1417 SE 1ST AVE.				Street	Addre	ss (P.O. Box Number is Not Acceptable)			
FT. LAUDERDALE FL 33316				<u> </u>					┨
F1.1	AUDENDALE FL 33316		83						ì
			84	City			85 Zip	Code	1
				L		F			4
office or r	agistared agent or both in the State (	of Florida. Such chande was authoria	zea ov	the corb	Corpor	ration submits this statement for the purpose of submits the statement for the purpose of the appropriate the statement of th	or changing it pintment as r	egistered	1-
agent. I a	m familiar with, and accept the obligat	ions of, Section 607.0505, Florida S	tatutes	•		,			Į
SIGNATURE									1
	Signature, typed or printed name of registered agen			nt signature r	required v	when reinstating) OATE  ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	OPS IN 12	13
12.			13.		τ—	ADDITIONS/CHANGES TO OFFICERS A	Change		1
TITLE	D CHARLES !	<del>-</del>	1.2 NAME		ĺ		<u></u>		;
NAME	HIGHLEY, CHARLES L.						,		U
STREET ADDRESS	125 N. BIRCH RD., STE. 301			TADDRESS					
CITY-ST-ZIP	FT. LAUDERDALE FL 33304		4 CITY-S	T-ZIP	-		Change	Addition	;
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NAME	ANDERTEN, THOMAS J.	B.	2 NAME						
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14. I 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 changed, proprint attachment with an address, with all other like empowered.

SIGNATURE: