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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$44905

(5)

SCOTT CONSTRUCTION ASSOCIATES, INC.

FILED Apr 23 1997 8:00am Secretary of State

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Principal Plac	e of Business	Maning Address							
5560 BEE RIDO	GE RD	5560 BEE RIDGE RD							
STE D-9 SARASOTA FL	94999	STE D-9 SARASOTA FL 34233-1507	,						
US	34233	US			3. Date Incorporated or Qualified	3a Dai	le of Last	Report	
00				04/10/1991 05/01/1996					
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	1		Applied For	
21 4204	EASTWOOD DRIVE	26 4204 EAST	rwoon	DR	65-0259500		—	Not Applicable	
Suite, Apt		Suite, Apt. #, etc.						5 Additional	
22		27			5. Certificate of Status Desired			Required	
City & State City & State					6. Election Campaign Financing		\$5.0	0 May Be	
23 SARA		28 SARASOTA	FL		Trust Fund Contribution			ed to Fees	
Zip	Country (1C	Zip	Coun	try	8. This corporation has liability for i	ntangible t	ax under	r s. 199.032.	
24 342 3	2 25 SARASOTA	29 34232	30 6	S] Yes [
	9, Name and Address of Current	Registered Agent	Ī		10. Name and Address of New Re	gistered A	gent		
SCO	TT, THOMAS W.		1	31 Name					
	4204 EASTWOOD DRIVE				Clerch Address /O.O. David Number in Nat Assessed 2				
	ASOTA FL 34232			Street Ac	Street Address (P.O. Box Number is Not Acceptable)				
			į.	33					
			<u> </u>				., . ,		
				34 City		FL	85 Zt	p Code	
11. Pursuant	to the provisions of Sections 607 0502	2 and 607 1508. Florida Statut	tes the ab	ove-named co	orporation submits this statement for the p	urnose of	changing	n its remistered	
office or r	registered agent, or both, in the State	of Florida, Such change was	authorized	by the corpo	ration's board of directors. I hereby accep	it the appo	intment a	as registered	
agent. I a	am familiar with, and accept the obliga	tions of, Section 607.0505, FF	orida Statu	tes.					
SIGNATURE	Signature, typed or printed name of registered agen	Loud (all, 3 Lotto (A)(3)	E. D. control	f ot o round	quired when reinstating)	DATE			
12.	OFFICERS AND		13.	Agent signature re-	ADDITIONS/CHANGES TO OFFIC		DIRECTO	ORS IN 12	
TITLE	PS	DELETE	11 HJ	F T	7.5511(015)(011)(1420-15-01)(0		Change		
NAME	SCOTT, THOMAS W.	—	1.2 NAM						
STREET ADDRESS	4204 EASTWOOD DR			EE1 ADDRESS					
	SARASOTA FL								
CITY-ST-ZIP TITLE	VPT	DELETE	2.1 1/11	r-ST-ZIP			Change	e Addition	
NAME	SCOTT, DENISE E.	occere	1	}			Onlings	Addition	
1	4204 EASTWOOD DR		2.2 NAN	i					
STREET ADDRESS				EFT ADDRESS					
CITY-ST-ZIP	SARASOTA FL	DOLLAR		Y- S1 - ZIP			Chaus	Addition	
TITLE		☐ DELETE	3 1 1111	1			Change	e L Addition	
NAME			3.2 NAM						
STREET ADDRESS				FET ADDRESS					
CITY-ST-ZIP				Y-\$1-ZIP					
TITLE		DELETE	4.1 7/11	E			☐ Change	e L Addition	
NAME			4. 2 NA	ME					
STREET ADDRESS			4.3 STR	EFT ADDRESS					
CITY-ST-ZIP			4.4 CiT	7-S1-ZIP		· <u></u>			
TITLE		☐ DELETE	5 1 THI	E			Changi	e 🔲 Addition	
NAME	İ		5.2 NAM	AE					
STREET ADDRESS			5.3 STR	EET ADDRESS					
CITY-ST-ZIP			5.4 CiT	r-S1-71P					
TITLE		DELETE	6.1 1(1)				Change	e Addition	
NAME			6.2 NAN	ME .					
STREET ADDRESS			6.3 STR	FET ADDRESS					
CITY-ST-ZIP				7-S1-ZIP					
401 VI 180			B.4 O/I						

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 frue 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.

MONATURE PLANTS OF STATE

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941-270-9440