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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S56878 (9)

HIRNEISE CONSTRUCTION, INC.

ERON HIRIGE HERCE HIRIG HERCE HIRIGE HERCE HIRIGE HERCH LEGEN LAKEN LEKEN EKHIR DEN BERKKORN I.

**FILED** 

Apr 20 1998 8:00am

Secretary of State

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Principal Place of Business Mailing Address				1 12 21 21 21 21 21 21 21 21 21 21 21 21	rant minus kinin dibil dibir ibni	
6007 S.W. 83RD DR 4007 S.W. 93RD DR						
GAINESVILLE US	FL 32608	GAINESVILLE FL 32608 US		DO NOT WRITE IN THIS SPACE		
05					3. Date Incorporated or Qualified	TO MOE
					05/21/1991	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
21 4007	11 4007 Sev. 93 of Dr. 26				59-3079252	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75 Additional
27					5. Certificate of Status Desired	Fee Required
City & State City & State					6. Election Campaign Financing	\$5.00 May Be
		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	′	8. This corporation owes or has paid the	
24	25		30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Currer	it Hegistereo Agent	81	Name	10. Name and Address of New Registers	Ja Agent
HIRNEISE, PAUL J.				, vaile		
	05 SW 44 LANE		82	Street Add	ress (P.O. Box Number is Not Acceptable)	
GAINESVILLE FL 32608			83		·	
			84	City	F	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 of fire or registered agent, or both, in the State of Florida, Such change was subprized by the corporation's board of directors. I become a provision and the appointment as 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, typod or printed narries of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AN		13.	ant organization region	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	P	DELETE	1.1 TITLE			Change Addition
NAME	HIRNEISE, PAUL J.		1.2 NAME			
STREET ADDRESS	8805 SW 44 LANE		1.3 STREE	ADDRESS		
CITY-ST-ZIP	GAINESVILLE FL 32608		1.4 CITY - ST - ZIP			
TITLE			2.1 TITLE			Change Addition
NAME	2.2		2.2 NAME			
STREET ADDRESS			2.3 STREET	ADDRESS		
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP		
TITLE		☐ DELETÉ	3.1 TITLE			Change Addition
NAME	1		3.2 NAME			
STREET ADDRESS			3.3 STREET	ADDRESS		
CITY-ST-ZIP	3.4.		3.4. CITY-	ST-ZIP		
TITLE		☐ DELÉTE	4.1 TITLE		· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4 3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CITY - S	T-ZIP		
TITLE		☐ DELETE	51 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		İ
CITY-ST-ZIP		······································	5.4 CITY - 9	T-ZIP		
TITLE	41	☐ DELETE	6.1 TITLE			Change Addition
NAME	*		6.2 NAME			
STREET ADDRESS	1		6.3 STREET	ADDRESS		
CITY-ST-ZIP		<u> </u>	6.4 CITY - 9	T-ZIP		

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 suppliemental 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 report 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 an intage linent with an address.