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 #

(3)

DOVETAIL CONSTRUCTION, INC.

FILED

May 04 1998 8:00am

Secretary of State

Princip	al Place	of f	Busine	SS
9000	CAMOD	400	CIDCI	•

Principal Place	of Business	Mailing Address						
3086 SAWGRASS CIRCLE 3086 SAWGRASS CIRCLE								
TALLAHASSEE FL 32308 TALLAHASSEE FL 32308				DO NOT WRITE I	IN THIS SDACE			
US		U\$			3. Date Incorporated or Qualified	IN THIS SPACE		
					07/18/1991			
Deleginal Oil	an of Duningon	Se Mailing Address						
2. Principal Place of Business 26. Mailing Address 26. 3010 Sawarass			~ = = /	سنده	4. FEI Number Applied For			
21 30 10 5 Suite, Apt. 1		26 3010 XWYY Suite, Apt. #, etc.	<u> </u>	711	59-3076739		t Applicable	
	*, acc	<u> </u>			Certificate of Status Desired	\$8.75 A		
22 Chu & Choto		27						
	City & State				6. Election Campaign Financing	\$5.00		
29 / Zip	Country 28 Jalla FC Country			7,4000 10 1 000				
່ ໃຊາ <i>ຂ</i>	~C	700000		Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
24 3200	25 Name and Address of Curren		30		Personal Property Tax due June 3 10. Name and Address of New Reg			
40		t negistered Agent	B1	Name	IV. Harrie Brid Address Of How Reg	istolog Main		
	ASBURY, THOMAS BANKS			Native				
3086 SAWGRASS CIRCLE			82	82 Street Address (P.O. Box Number is Not Acceptable)				
TAI	LLAHASSEE FL 32308		40					
			83					
			84	City		85 Zip C	Code	
			"	"",		FL ["		
11. Pursuant to	o the provisions of Sections 607.050.	2 and 607,1508, Florida Statutes of Florida, Such change was au	s, the abov	e-named o	corporation submits this statement for the purporation's board of directors. I hereby accept	rpose of changing its	s registered registered	
agent. I an	n familiar with, and accept the obliga	ations of, Section 607.0505, Flor	ida Statute	S.		the opposite to the		
SIGNATURE								
	Signature, typed or printed name of registered age			ent signature	required when reinstating)	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE			
TITLE	ACRUMY THOMAS R	☐ DELETE	1.1 TITLE		VP	La Change	Addition	
NAME	ASBURY, THOMAS B.		1.2 NAME				4	
STREET ADDRESS	3424 DORCHESTER COURT		1.3 STAEET	I ADDRESS				
CITY-ST-ZIP	TALLAHASSEE FL		1.4 CITY-5	ST-ZIP				
TITLE	VP	☐ DELETE	2.1 TITLE	ŀ	P/ 5	Change	Addition	
NAME	MILLER, DANNY		2.2 NAME	Î				
STREET ADDRESS	RT. 3, BOX 2040		2.3 STREET	ADDRESS				
CITY-ST-ZIP	QUINCY FL		2.4 CITY-	ST-ZIP			1	
TITLE	S	DELETE	3.1 TITLE			Change	Addition	
NAME	HAYS, JAMES M		3.2 NAME					
STREET ADDRESS	3326 SEDONA		3.3 STREET	ADDRESS				
CITY-ST-ZIP	TALLAHASSEE FL 32308		3.4. CITY-					
TITLE		DELETE	4.1 TITLE			Change	Addition	
NAME		_	4. 2 NAME				- '	
STREET ADDRESS			4.3 STREET	ſ				
CITY-ST-ZIP			4.4 CITY-5					
TITLE		DELETE	5.1 TITLE	21 2.91		Change	Addition	
NAME			5.2 NAME			s.i.aigo	,	
1			1	LADDDECC				
STREET ADDRESS			5.3 STREET	- 1			J	
CITY-ST-ZIP		DELETE	5.4 CITY-S	51 - ZIP		Change	Addition	
TITLE		רין הנרבונ	6.1 TITLE			LLJ Change	TT VOCUUL	
NAME			6.2 NAME	l]	
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY-ST-ZIP			6.4 CITY -	ST-ZIP				
14. I hereby co	ertify that the information supplied w on this annual report or supplementa	ith this tiling does not qualify for it annual report is true and acce	e exemp	otion state: lat my sicr	d in Section 119.07(3)(i), Florida Statutes. I fi nature, hall have the same legal effect as if r required by Chapter 607, Florida Statutes; a	urtner certify that the made under oath: the	Information at I am an	
officer or c	firector of the corporation of the rece	eiver or trustee empowered to g	xegute this	report as	required by Chapter 607 Florida statutes; a	nd that my name app	pears in	
Block 12 o	r Block 13 if changed√or oh an attac	chment with ap-address. `				\sim	ļ	