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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # \$83964

(4)

CHEEK CONSTRUCTION, INC.

Principal Piace of Business

Mailing Address

\$47 WEST 8TH AVENUE MT. DORA FL 32757 347 WEST 8TH AVENUE MT. DORA FL 32757-486 FILED
May 12 1997 8:00am
Secretary of State



MT. DORA FL	32757	MT. DORA FL 32757-4961							
					3. Date Incorporated or Qualified 10/01/1991		of Last F	Report	
2. Principal Pi	ace of Bysiness. 7 Elysium Bluc	1. 2a. Mailing Address EA	siun	Blu	4. FEI Number		A	oplied For of Applicable	
Suite, Act.		Suite, Apt. #, etc.		<u> </u>	5. Certificate of Status Desired		\$8.75	Additional equired	
City & State		28 Mount De	ora	FI	Election Campaign Financing Trust Fund Contribution	L.)	\$5.00	May Be	
Zip	Country L	Zip	Country	L	This corporation has liability for	r intangible ta		to Fees . 199.032,	
24 3275	9. Name and Address of Currer	129 3273 / 30 The Registered Agent	o 4a	۸c	Florida Statutes 10. Name and Address of New F	Yes 🖸			
CHE	EK, W. ALAN		81	Name	16. Hanne and Vadaless & Heat I	ogistored Ag			
347 WEST 8TH AVENUE		82 Street Addr		ess (P.O. Box Number is Not Acceptable)					
MT. DORA FL 32757			83						
			63						
			84	City		FL	85 Zip	Code	
11. Pursuant t	o the provisions of Sections 607.050 egistered agent, or both, in the State	02 and 607.1508, Florida Statules, of Florida. Such change was aut	, the above	e-named of	corporation submits this statement for the oralion's board of directors. I hereby acc	purpose of cl	hanging it	s registered	
agent Lar	n familiar with, and accept the oblig	ations of, Section 607.0505, Florid	da Statute	3.		opi vio appoii	Million Do	, og iotoi oo	
SIGNATURE	Signature, typed or printed name of registered age	ent and tille if applicable. (NOTE F	Registered Age	n erutengia In	equired when reinstating)	DATE			
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFF		IRECTOR	IS IN 12	
THEF	DPS	☐ DELETE	1.1 TITLE		V		Change	Addition	
NAME	CHEEK, W. ALAN		1.2 NAME		Diane B. Cheek				
STREET ADDRESS	347 WEST 8TH AVENUE		1.3 STREET	ADDRESS	TOTT Elysium Blud	1	767		
CiTY+ST-ZIP	MT. DORA FL		1.4 CI Y-S	T-ZIP	Mount Dora, Flor	da 32			
TITLE		☐ DELETE	2.1 Till E		·	L.	_ Change	Addition	
NAME			2.2 NAME						
STREET ADDRÉSS			2.3 \$1 EET						
City+\$1+ZIP TITLE		D DELETE	2. 4 C Y - 1 3.1 Tt E	51 - ZIP			Change	Addition	
NAME			3.2 N ME	1		h	T CHAILIÈE	F" L MONTON	
STREET ADDRESS			3.3 S EEF	ADDRESS					
CITY - S1 - ZIP				ST-ZIP					
TITLE		DELETE	4.1 T		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Change	Addition	
NAME			4.24 ME						
STREET ADDRESS			4.3 S FET	ADDRESS					
CIYY-SI-7IP			44 C -S	T-ZIP					
TITLE		☐ DELETE	511 €	Ī			Change	Addition	
NAME			52 N						
STHEET ADDRESS			53S ET	ADDRESS					
C(7Y - ST - 7)P		D. D. L. F. T. C.		T - ZIP		····	1 4.		
HILE		☐ DELETE	61	ł		L.,	. Change	Addition	
NAME OLDER LEFERON			621 E						
STREET ADDRESS				ADD 458					
14. Ldo bereb	y certify that the information supplied	d with this iling does not qually f		T- IP	ated in Section 119.07(3)(i). Florida Statut	on Hurther n	artifu that	tho	
information I am an of	y centry that the information supplied in indicated on this annual report or s ficer or director of the corporation or Block 12 or Block 13 if changed, o	supplemental annual report is true the receiver or trustee employers	ed to or	rate and to te this re	that my signature shall have the same leg port to required by Chapter 607, Flirida	es, i further of pal effect as if Statutes, and	made und that my n	ure der oath; that lame	