

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

PROFIT CORPORATION ANNUAL REPORT 2000



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

00 APR 27 AM 9:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # V35434  
1. Corporation Name  
GLENROSE CONSTRUCTION, INC.

Principal Place of Business  
13085 LA MIRANDA CIRCLE  
WELLINGTON FL 33414  
US

Mailing Address  
~~4929 HEINE DRIVE  
LAKE WORTH FL 33461  
US~~

CORRECT ADDRESS

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
21 13085 LA MIRADA CIRCLE  
Suite, Apt. #, etc.

2a. Mailing Address  
26 13085 LA MIRADA CIRCLE  
Suite, Apt. #, etc.

3. Date Incorporated or Qualified  
05/12/1992

4. FEI Number  
65-0331909

5. Certificate of Status Desired  \$8.75 Additional Fee Recurred

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

8. This corporation owes the current year intangible Personal Property Tax.  Yes  No

23 City & State  
WELLINGTON FL  
24 Zip 33414 25 Country USA

27 City & State  
Wellington, FL  
29 Zip 33414 30 Country USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GLENNON, JOSEPH GERALD III  
100 CORTES AV.  
ROYAL PALM BEACH FL 33411

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
13085 LA MIRADA CIRCLE  
83  
84 City WELLINGTON FL 85 Zip Code 33414

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 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, and I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: Joseph G Glennon III DATE: 4/27/2000

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input type="checkbox"/> DELETE
NAME	GLENNON, JOSEPH GERALD	
STREET ADDRESS	100 CORTES AVENUE	
CITY-ST-ZIP	ROYAL PALM BEACH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Add
12 NAME	GLENNON III JOSEPH GERALD	
13 STREET ADDRESS	13085 LA MIRADA CIRCLE	
14 CITY-ST-ZIP	WELLINGTON, FL. 33414	
21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

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, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joseph G Glennon III

April 27, 2000

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