## 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 #

(5)

PIONEER CONSTRUCTION OF NAPLES, INC.

**FILED** Mar 04 1998 8:00am Secretary of State



| 27     Certificate of Status Desired   Fe  | Applied For Not Applicable 75 Additional se Required .00 May Be Ided to Fees               |
|--|--|
| NAPLES FL 34116   US 3 4 1 1 1   | Applied For Not Applicable 75 Additional se Required .00 May Be Ided to Fees ar Intangible |
| 22   24   25   29   30   20   20   20   20   20   20   20  | Not Applicable 75 Additional se Required .00 May Be ided to Fees ar Intangible             |
| 2. Principal Place of Business  2a. Mailing Address  2b. G5-0344455  Suite, Apt. #, etc.  Suite, Apt. #, etc.  5. Certificate of Status Desired  Edity & State  City & State  City & State  City & State  2a. Mailing Address  Suite, Apt. #, etc.  City & State  City & State  City & State  2b. Country  Zip  Country  Zip  Country  Zip  Country  Zip  Country  Zip  Country  S. This corporation owes or has paid the current years of the course of the current years of the curre | Not Applicable 75 Additional se Required .00 May Be ided to Fees ar Intangible             |
| Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  S. Election Campaign Financing Trust Fund Contribution  Ad  City & State  Country  Country  Country  Country  S. This corporation owes or has paid the current year Personal Property Tax due June 30.   | 75 Additional se Required .00 May Be Ided to Fees ar Intangible                            |
| 27 City & State Ci | .00 May Be<br>ided to Fees<br>ar Intangible  |
| 28 Trust Fund Contribution Ad Zip Country Zip Country 8. This corporation owes or has paid the current year 24 25 29 30 Personal Property Tax due June 30. Yes   | ided to Fees<br>ar Intangible  |
| 24 25 29 30 Personal Property Tax due June 30.   |  |
| 6 Mama and Address of Current Danistavad Agent   |  |
| 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent   |  |
| DILONGO, GEORGE 81 Name  | ,  |
| 4833 23RD AVE. SW 82 Street Address (P.O. Box Number is Not Acceptable)  |  |
| NAPLES FL 34116  | •  |
|  |  |
| 84 City FL 85  | Zip Code   |
| Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of change 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature. Typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating)  DATE  |  |
| 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS   |  |
| TITLE, P DELETE 1.1 TITLE  | ange   |
| NAME DI LONGO, GEORGE 1.2 NAME STREET ADDRESS 4833 23RD AVE. SW 1.3 STREET ADDRESS   |  |
| CITY-ST-ZIP NAPLES FL 1.4 CITY-ST-ZIP  |  |
| TITLE S DELETE 2.1 TITLE Che   | ange   |
| NAME DI LONGO, ANTONIETTA 2.2 NAME   | • -  |
| STREET ADDRESS 4833 23RD AVE. SW 2.3 STREET ADDRESS  |  |
| CITY-ST-ZIP NAPLES FL 2.4 CITY-ST-ZIP  |  |
| TILE T DELETE 3.1 TITLE Cha  | ange 🔲 Addition  |
| NAME DEL SORDO, JAMES 32 NAME  |  |
| STREET ADDRESS 1913 40TH TERR. SW 3.3 STREET ADDRESS   |  |
| CRTY-ST-ZIP         3.4. CITY-ST-ZIP           TRILE         DELETE         4.1 TITLE         Cha  | ange 🔲 Addition  |
| TITLE L DELETE 4.1 TITLE L Cha   | AND DIMORDIA   |
| STREET ADDRESS 4.2 NAME 4.3 STREET ADDRESS   |  |
| CITY-ST-ZIP 4.4 CITY-ST-ZIP  |  |
| TITLE DELETE 5.1 TITLE Che   | inge 🔲 Addition  |
| NAME 5.2 NAME  |  |
| STREET ADDRESS 5.3 STREET ADDRESS  |  |
| CITY-ST-ZIP 54 CITY-S1-ZIP   |  |
| TITLE DELETE 6.1 TITLE Cha   | inge Addition  |
| NAME 6.2 NAME  | :  |
| STREET ADDRESS 6.3 STREET ADDRESS  |  |
| CITY-ST-ZIP 64 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. I hereby certify that the information of policy with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that  | t the Information  |

at my signature shall have the same legal effect as if made under oath; that I am an report as required by Chapter 607, Florida Statutes; and that my name appears in