

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR 21 PM 3:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V53248

(3)

1. Corporation Name

RESCHKE CONSTRUCTION, INC.

Principal Place of Business

ROUTE 2 BOX 213
STEVE ROBERTS SPECIAL
ZOLFO SPRINGS FL 33890

Mailing Address

ROUTE 2 BOX 213
STEVE ROBERTS SPECIAL
ZOLFO SPRINGS FL 33890

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
07/23/1992

3a. Date of Last Report
02/18/1994

4. FEI Number
65-0354298

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RESCHKE, WILLIAM F.
RT. 2 BOX 213
STEVE ROBERTS SPECIAL
ZOLFO SPRINGS FL 33890

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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 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

William F. Reschke
Signature, typed or printed name of registered agent and his if applicable.

WILLIAM F. RESCHKE PRES.

3-18-95

(NOTE: Registered Agent signature required when rotating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
DP	RESCHKE, WILLIAM F.	RT. 2, BOX 213	ZOLFO SPRINGS FL
DSI	RESCHKE, DOLORES J.	RT. 2, BOX 213	ZOLFO SPRINGS FL
DV	RESCHKE, JOHN E.	1180 NW KNOLLWOOD CIRCLE	WAUCHULA FL

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
				☐	☐
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	Change	Addition
				☐	☐
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	Change	Addition
				☐	☐
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	Change	Addition
				☐	☐
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	Change	Addition
				☐	☐
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	Change	Addition
				☐	☐

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

William F. Reschke
Signature and typed or printed name of signing officer or director
WILLIAM F. RESCHKE

3-18-95 (813)-735-0660