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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

V64077

(3)

1. Corporation Name

OSPREY BUILDERS, INC.

Principal Place of Business ---- Mailing Address

AND MANAGER AVE CW



3021 MANATE RUSKIN FL 33		3021 MANATEE AVE., S.W. RUSKIN FL 33570							
						3. Date Incorporated or Qualified 09/14/1992	3a. Date	of Lest R 1/03/19	
Principa! Plac	e of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number			Applied For
		26				59-3142452		[]	Not Applicable
Suite. Apt. #,	etc	Suite, Apt #, etc.				5. Certificate of Status Desired			Additional Required
City & State		City & State		•		Election Campaign Financing Trust Fund Contribution			O May Be d to Fees
Zφ	Country 25	21p	30 Cou	ntry		8. This corporation has liability for Florida Statutes Yes	intangible ta	x under s	199.032,
	9. Name and Address of Curre	nt Registered Agent			· · · · · · · ·	10. Name and Address of New F	Registered A	gent	
				81	Name				
NYMARK, DENNIS V.				82	Street A	ddress (P.O. Box Number is Not Acceptat	ole)		***************************************
110 S. PEBBLE BEACH BLVD. SUN CITY CENTER FL 33573				83					
				84	City		FL	85 Z	p Code
1 Durantani	the realisions of Sections 607 OFO	2 and 607 1508 Florida Status	tes the shr	We-r	named cor	poration submits this statement for the pu		naina its	registered offic
	Signature, typed or printed haute of registered ages	nt amo tide if applicable. (N ND DIRECTORS	ЮТЕ Registered	i Ager	nt signature rec	pured when reinstaling) ADOITIONS/CHANGES TO OFF	DATE	DIRECTO	ORS IN 12
2 .	PST OFFICERS AF	DELETE	1, 1 1	TTI E		ADDITIONO/CITATOLO TO CIT		Change	Addition
) I E	MCCONKY, DAVID W.	Приск	1.2 N				_		
AME .	3021 MANATEE AVE., S.W.		I .						
REEL ADDRESS	RUSKIN FL 33570				ADDRESS				
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iif	MCCONKY, DAVID W.	Пресен	2 2 N		- 1				
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HEE! ACCURESS	RUSKIN FL 33570				ST-ZIP				
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RÉET ALORESS			533	TREE	T ADDRESS				
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AMF			621	IAME					
THEET ADDRESS			633	STREE	T ADDRESS				
ntv.St.7iP	L.		640	OITY-:	ST-ZIP				
1. I do hereb	y certify that the information supplied	d with this filing is voluntarily fu	rnished and	doe	s not qua	lify for the exemption stated in Section 119	9.07(3)(k), Fk	xida Stat	ites. I further

corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name oath; that I am an office appears in Block 12 d

W. MCCONKY 3.9.96 813645 1005