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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 20 1998 8:00am

Secretary of State

734-2600

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V71547

(6)

1. Corporation COSPER	R CONSTRUCTION MANAG	<b>\</b>			
Principal Place	of Business	Mailing Address			BION BION BION BEAM DIEN 1901
2196 MAIN ST #A 2196 MAIN ST #A DUNEDIN FL 34698 DUNEDIN FL 34698				DO NOT WRITE IN TH	HIS SPACE
				3. Date Incorporated or Qualified	
				10/15/1992	
2. Principal Pla	ace of Business	2a. Mailing Address		4, FÉI Number	Applied For
21		26		59-3147042	Not Applicable
Suite, Apt. #	V, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22		27			
City & State	•	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
<b>23</b> Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25		30	Personal Property Tax due June 30.	Yes No
<u> </u>	9. Name and Address of Curren			10. Name and Address of New Register	red Agent
ROL	MAN, THOMAS A		81 Name		
2196 MAIN STREET			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
SUITE L			00517100		
DUN	NEDIN FL 34698		63		
			84 City		85 Zip Code
			'		-L  00   E40 0000
SIGNATURE	Monione.	osperp. 11	esiden/	poration submits this statement for the purposition's board of directors. I hereby accept the	appointment as registered
12.	Signature, typed or printed name of registered age OFFICERS AN		Registered Agent signature requi	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	PTD	DELETE	1.1 TITLE		Change Addition
NAME	COSPER, THOMAS C., JR.		1.2 NAME		
STREET ADDRESS	2196 MAIN STREET, UNIT A		1.3 STREET ADDRESS		
CITY-ST-ZIP	DUNEDIN FL 34698		1.4 CITY-ST-ZIP		
TITLE	V\$D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	COSPER, MARILYN A.		2.2 NAME		
STREET ADDRESS	2196 MAIN STREET, UNIT A		2.3 STREET ADDRESS		
CITY-ST-ZIP	DUNEDIN FL 34698	Cloruette	2. 4 CITY+ST-ZIP		Change Addition
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	3.4. CITY-ST-ZIP 4.1 TiTLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADORESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		•
CITY-ST-ZIP			6.4 CITY-ST-ZIP		alf at a at 1 d
indicated of	ertify that the information supplied won this annual report or supplement director of the corporation of the ecor Block 13 if changed, or on an atta	if annual report is true and acet giver or trustee empowered to e	r the exemption stated in yate and that my signatu kecute this report as rec	Section 119.07(3)(i), Florida Statutes. I furtheure shall have the same legal effect as if madured by Chapter 607, Florida Statutes; and t	e under oath; that I am an hat my ame appears in