Visited Street	1995	DIVISION	ecretary of State N OF CORPORA		rolvisio	FILED ETARY OF S N OF CORPOR	TATE RATIONS	
DOCUMENT # G83598 (4)					.95 APR -7 AMII: 13			
	MMINGS CONSTRUCTION		y W	- 4		٠.		
rincipal Place of Business Malling Address				_				
24 WESTGATE ROAD ARPON SPRINGS FL 34689		224 WESTGATE ROATERON SPRINGS F						
W.C. C.	IOO TE MOOD	DESCRIPTION .	FL 04003		3. Date incorporated or Qualified	TE IN THIS SPACE		
					02/02/1984	03/01/	•	
Principal Pl	ace of Business	2e. Mailing Address 26	,		4. FEI Number 59-2369230		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Sertificate of Status Desired	rı \$	Not Applicable \$8.75 Additional	
City & State		27 City & State				Fee Required		
City & Start	<b>;</b>	City & State			6. Election Campalgn Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip	Country	ΖΙp	Coun	itry	8. This corporation has liability fo	r intangible tax un		
	9. Name and Address of Curr	29 rent Registered Agent	[30]		Florida Statutes Ye  10. Name and Address of New		nt	
				81 Name				
	is, timothy a. Igate Rd.		þ	82 Street Addr	ress (P.O. Box Number is Not Accepte	able)		
	IGATE NJ. SPRINGS FL 34689		1	B3	·			
*** ·	# 1 HI 199 7 & C		<del> </del>	B4 City		8	5 Zip Code	
	10 -4 407 01			,		<u> </u>		
Pursuant I or register familiar wil	to the provisions of Sections 607.05 led agent, or both, in the State of Fli th, and accept the obligations of, Se	buz and 607.1508, Florida St lorida. Such change was auth action 607.0505. Florida Stat	talutes, the above horized by the contract	re-named corpor prporation's boar	ration submits this statement for the p rd of directors. I hereby accept the ap	urpose of changir pointment as regi	ng its registered offici istered agent. I am	
familiar wil   GNATURE	th, and accept the obligations of, Se Signature, typed or printed name of registered ag	ection 607.0505, Florida Stat gent and title (applicable	NOTE: Registered A	e-named corpor orporation's boar	d when renstating)	DATE		
Iamiliar wil IGNATURE _ 2.	Signature, typed or printed name of registered ag  OFFICERS A	ection 607.0505, Florida Stat	itules.	lgunt signature require		DATE FICERS AND DIR		
Iamiliar wil GNATURE _ 2. R.E IME	Signature, typed or purified narrie of registered as OFFICERS A DP CUMMENGS, TIMOTHY A.	ection 607.0505, Florida Stat gent and title (applicable	(NOTE: Registered A  13. 1.1 TIT	lgant signaturo require LE ME	d when renstating)	DATE FICERS AND DIR	RECTORS IN 12	
Tamiliar wil GNATURE _ R. R.E IME REET ADDRESS	Signature, typed or printed name of registered ag  OFFICERS A	ection 607.0505, Florida Stat gent and title (applicable	MOTE: Registered A  13. 1.1 TII: 1.2 NAA 1.3 STR	Agunt signature required LE ME LET ADDRESS	d when renstating)	DATE FICERS AND DIR	RECTORS IN 12	
Iamiliar wil GNATURE _ 2. R.E IJAE REET ADDRESS FY-SI-ZIP	Signature, typed or printed name of registered as OFFICERS ADP CUMMINGS, TIMOTHY A. 224 WESTGATE RD. TARPON SPGS. FL	ection 607.0505, Florida Stat gent and title (applicable	MOTE: Registered A  13. 1.1 TII: 1.2 NAA 1.3 STR	Agent signature required LE ME LEET ADDRESS Y-ST-ZIP	d when renstating)	DATE FICERS AND DIR	RECTORS IN 12	
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