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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 213417

(9)

1. Corpora	mon name —	. (-)			1			
BRICE CONSTRUCTION, INC.					r hattiin hindt nibūž siiti atābi libūi v	aga Biddi Galli Gabled	nihir Braid r	W A1 F (A1 F
								un un
Principal Place of Business Mailing Address					T SABELLE YANDON KENDON PIKUN DANDAN HANYA I	<u>Bât Bullin Silan Aldin d</u>	JEDJE Pro fil d	HAN (AD)
5517 SW 69 TERR 5517 SW 69 TERR GAINESVILLE FL 32608 GAINESVILLE FL 32608-49 US US			1541					
					3. Date Incorporated or Qualified			port
2. Principal Place of Business 2a, Mailing Address					06/30/1958 4. FEI Number	06/19/		olied For
21 26		}			59-0843274			Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Certificate of Status Desired	□ \$i	8.75 A	
22 27					6. Certificate of Status Desired		Fee Rec	
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution		5.00 M Added to	
Zip	Country	Zip	Countr	у .	8. This corporation has liability for			199.032,
24	25	29	30		Florida Statutes Yes No			
	9. Name and Address of Cur	rrent Registered Agent	81	I Name	10, Name and Address of New F	Jegistered Ager	11	
MILLER, DAVID M								
5517 SW 69 TERR GAINESVILLE FL 32608			82	Street Addi	ress (P.O. Box Number is Not Accept	able)		}
_			83					
ļ			84	City		85	Zip C	ode
■ D mous	set to the arminion of Continue 607.	OE02 and 607 1509 Elbrida Curt	tor the above	10 Damod core	poration pulpoits this statement for the	FL O	naina ita	registered
office of	or registered agent, or both, in the St	tate of Florida Such change was	authorized to	y the corpora	poration submits this statement for the tion's board of directors. I hereby acc	ept the appointment	nent as r	egistered
		oligations of Section 607.0505, F	-iorida Statute	? S.				į
SIGNATUR	R. Signature, typed or printed name of registered	diagnor and tituit applicable. (NC	OTE. Registered Ag	gent a gnature requi	red when reinstating)	DATE		[
12.	OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF			
HILF	PD	DELETE	1.1 TITLE	. 1		LJ (Change	Addition
NAME	HICKS, THOMAS P., JR.		1,2 NAME	ſ				}
\$TREET ACURE			1	TADDRESS				ţ
CITY - ST - 7IP	GAINESVILLE FL			ST-ZIP			Change	Addition
IUFE	STD				LLI Old		Juanya	L Modition
NAME STREET ADDRES	MILLER, DAVID M 5517 SW 69 TERR		2.2 NAME	T ADDRESS				}
	GAINESVILLE, FL 00000		2.4 CITY			<u>.</u>		
Tille	VO	DELETE	3 1 TITLE				Change	Addition
NAME	BRICE, CARLA		3.2 NAME				•	· · · · · · · · · · · · · · · · · · ·
STREE! ADDRE				T ADDRESS				ł
Cify - ST- ZiP	GAINESVILLE FL		34 CITY	· · · · · · · · · · · · · · · · · · ·				}
TILLE	D	DELETE	4 1 TITLE				Change	Addition
NAME	BRICE, HAZEL M		4, 2 NAM	E)
STREET ADDRES			4.3 STREE	T ADDRESS				1
C(1Y-S1-7)P	GAINESVILLE FL		4.4 CITY-	ST-ZIP				
TITLE	D	DELETE	5.1 TITLE				Change	Addition
NAME	HICKS, ALISON L		5.2 NAME					Ì
STHEET ACORE			5.3 STREE	T ADDRESS				l
City - S1 - ZIP	GAINESVILLE FL		5.4 CITY-		<u> </u>			 _
TITLE	D	DELETE	6.1 TITLE	l l	4		Change	Addition
NAME	HICKS, STEPHANIE A		6.2 NAME	1				Ì

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE

STHEET ADDRESS

CITY - \$1 - ZIP

5517 SW 69 TERR

DOLLOW WILL FIF OUTFIDAND M. MILLER 424197 (352) 372-7736

FILED

Apr 30 1997 8:00am

Secretary of State