SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

245435

(3)

HICKS CONSTRUCTION CO., INC.

FILED Jul 09 1998 8:00am Secretary of State



Principal Plac	ce of Business	Mailing Address			i nadija ilait ahdat ahihi ahdad hirat ahih ahah ahah ahah ahah alahi alahi ilahi
630 CYPRESS STREET		630 CYPRESS STREET			
MERRITT ISLAND FL \$2952		MERRITT ISLAND FL 32952			DO NOT :: 700 - 10
					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
2. Principal F	Place of Business	2a. Mailing Address			03/10/1961 4. FEI Number Applied For
21		26			59-0931358 Not Applicable
Sulte, Apt.	. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27			5. Certificate of Status Desired Fee Required
Clty & Sta	l <del>e</del>	City & State			6. Election Campaign Financing \$5.00 May Be
23		28	,		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Countr	У	8. This corporation owes or has paid the current year Intangible
24	25	29	30		Personal Property Tax due June 30.  Yes No
	9. Name and Address of Curre	nt Registered Agent	81	l Ma	10. Name and Address of New Registered Agent Name
	HICKS,R W			l'a	10110
	1 WILMAR AVE		82	Str	Street Address (P.O. Box Number is Not Acceptable)
MEH	RITT ISLAND FL 32952		83		
			84	Cit	City FL 85 Zip Code
11. Pursuan	t to the provisions of sections 607.050	2 and 607.1508, Florida Statute	s. the above	.L	med corporation submits this statement for the purpose of changing its registered
office or	registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such change was a	uthorized b	y the d	e corporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	with and doodpt the oblig	parione or, occitor for today, FID	QidiUle	v.	
SIGNATURE	Signature, typed or printed name of registered age	int and title if applicable. (NO	TE Registered	Agent sk	t signature required when reinstating) DATE
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE		Change L. Addition
NAME	HICKS,R W		1.2 NAME		
STREET ADORESS	1461 WILMAR AVENUE		1.3 STREE		<u> </u>
CITY-ST-ZIP	MERRITT ISLAND FL		1.4 CITY-S	T-ZIP	
TITLE	D OPEN MADOLE O	DELETE	2.1 TITLE		Change Addition
NAME	GREEN,HAROLD G		2.2 NAME		
STREET ADORESS	630 CYPRESS ST		2.3 STREE		
CITY-ST-ZIP TITLE	MERRITT ISLAND FL.	——————————————————————————————————————	2.4 CITY-S 3.1 TITLE	T-ZIP	
NAME	HICKS,JOAN W	L DELETE	3.1 TITLE		Change Addition
STREET ADDRESS	630 CYPRESS ST			r Annor	NDF65
CITY-ST-ZIP	MERRITT ISLAND FL		3.3 STREE		
TITLE	VD	DELETE	4.1 TITLE	1-ZIP	· · · · · · · · · · · · · · · · · · ·
NAME	HICKS, R JOSEPH	L DELETE	4.2 NAME		Change Addition
STREET ADDRESS	6355 WIEN LN		4.3 STREE	T ANDRE	IRESS
CITY-ST-ZIP	COOOA, FL 00000		4.4 CITY-S		
TITLE	0000111110000	DELETE	5.1 TITLE	14LIF	Change Addition
NAME '		[] DECE 12	5.2 NAME		Change C Addition
STREET ADDRESS			5.3 STREE	F ADDRE	PRESS
CITY-ST-ZIP			5.4 CITY-S		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME		- Partie	6.2 NAME		Cutange C Addition
STREET ADDRESS			6.3 STREET	ADDRE	RESS
CITY-ST-ZIP			6.4 CITY-S		

14. I 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 12 or Block 13 if changed, or on an attachment with an address.

alalad

(Jun) 453-3140

EU34 (5/98)