

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 14 AM 8:06

DOCUMENT # 294159 (9)
1. Corporation Name
THE GREATER CONSTRUCTION CORP.

Principal Place of Business Mailing Address
1105 KENSINGTON PK DR 1105 KENSINGTON PK DR
ALTAMONTE SPGS FL 32714 ALTAMONTE SPGS FL 32714

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 08/21/1965	3a. Date of Last Report 05/01/1994
4. FEI Number 59-1107583	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
State, Apt. #, etc. 22	State, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent MANDELL, ROBERT A. 1105 KENSINGTON PARK DR ALTAMONTE SPRINGS FL 32714		10. Name and Address of New Registered Agent	
81 Name		85 Zip Code	
82 Street Address (P.O. Box Number is Not Acceptable)			
83			
84 City		FL	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am fully aware of, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE: _____
(Print or type in printed name of registered agent and the # of copies) (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE SD	ZIMMERMAN, LESTER 1105 KENSINGTON PARK DR ALTAMONTE SPRINGS FL	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE ASTD	BILLINGS, GEORGE H JR 1105 KENSINGTON PARK DR ALTAMONTE SPRINGS FL	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE CD	MANDELL, LESTER N 1105 KENSINGTON PARK DR ALTAMONTE SPRINGS FL	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE PD	MANDELL, ROBERT A. 1105 KENSINGTON PARK DR ALTAMONTE SPRINGS FL	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VO	SNYDER, SIMON 1105 KENSINGTON PARK DR ALTAMONTE SPRINGS FL	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VO	ZIMMERMAN, STEVEN 1105 KENSINGTON PARK DR ALTAMONTE SPRINGS FL	6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. I do hereby certify that the information provided with this filing is voluntarily furnished and does not comply for the description stated in Section 110.07(3)(b), 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 secretary or trustee responsible to prepare this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if checked. I am not affiliated with an address.

SIGNATURE: *Lester Zimmerman* 3/9/95 407 869-0300
(Signature of Registered Agent) (Date) (Phone Number)