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Mar 04 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 350469

(3)

1. Corporation Name

DYCOM INDUSTRIES, INC.

Principal Place of Business

4440 PGA BLVD
SUITE 600
PALM BEACH GARDENS FL 33410-6542
US

Mailing Address

4440 PGA BLVD
SUITE 600
PALM BEACH GARDENS FL 33410-6542
US



3. Date Incorporated or Qualified

08/07/1969

3a. Date of Last Report

03/07/1996

4. FEI Number

59-1277135

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

FRAZIER, PATRICIA B
4440 PGA BLVD
SUITE 600
PALM BEACH GARDENS FL 33410

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP	☐ DELETE
NAME	ROSEMAN, RONALD L	
STREET ADDRESS	9723 TIFFANY OAKS LN #3	
CITY - ST - ZIP	TAMPA FL	
TITLE	D	☐ DELETE
NAME	YOUNKIN, RONALD P.	
STREET ADDRESS	555 GREENLAWN AVE	
CITY - ST - ZIP	COLUMBUS OH	
TITLE	S	☐ DELETE
NAME	FRAZIER, PATRICIA B	
STREET ADDRESS	4440 PGA BLVD #600	
CITY - ST - ZIP	PALM BEACH GARDENS FL	
TITLE	D	☐ DELETE
NAME	ADAMS, LOUIS W, JR.	
STREET ADDRESS	3108 VISTAMAR ST #7	
CITY - ST - ZIP	FORT LAUDERDALE FL	
TITLE	CD	☐ DELETE
NAME	PLEDGER, THOMAS R	
STREET ADDRESS	4440 PGA BLVD #600	
CITY - ST - ZIP	PALM BEACH GARDENS F	
TITLE	VP	☐ DELETE
NAME	BETLACH, DOUGLAS J	
STREET ADDRESS	4440 PGA BLVD #600	
CITY - ST - ZIP	PALM BEACH GARDENS FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Director	☒ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Patricia B. Frazier 1/16/97

561 627-7171

Date

Daytime Phone #

CR2E034 (9/96)