

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

CORPORATION  
ANNUAL REPORT  
1995



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

**APPROVED  
AND  
FILED**

**95 APR 17 PM 1:05**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**DOCUMENT # 418459 (4)**

1. Corporation Name  
**GARNER ASPHALT PAVING & SEALING CO., INC.**

Principal Place of Business <b>9400 LAZY LANE TAMPA FL 33614</b>	Mailing Address <b>9400 LAZY LANE TAMPA FL 33614</b>
---	---

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified <b>02/07/1973</b>	3a. Date of Last Report <b>03/15/1994</b>
4. FEI Number <b>59-1441960</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

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

9. Name and Address of Current Registered Agent  
**CLARK, JONALD D. ESQ  
1800 2 ST STE 700  
SARASOTA FL 34236**

10. Name and Address of New Registered Agent  
81 Name  
82 Street  
83 City  
84 City  
**GARNER, RON  
9400 Lazy Lane  
Tampa, FL 33614-1518**

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: *Ronald J. Garner, Pres* (NOTE: Registered Agent signature required when re-registering) DATE: **4-11-95**

12. OFFICERS AND DIRECTORS

P NAME: <b>GARNER, RO</b> STREET ADDRESS: <b>9400 LAZY LANE</b> CITY - ST - ZIP: <b>TAMPA FL 33614-1518</b>
VP NAME: <b>GARNER, LENORE J.</b> STREET ADDRESS: <b>1384 ECKLES DRIVE</b> CITY - ST - ZIP: <b>TAMPA FL</b>
S NAME: <b>GARNER, LENORE</b> STREET ADDRESS: <b>1384 ECKLES DRIVE</b> CITY - ST - ZIP: <b>TAMPA FL</b>
T NAME: <b>GARNER, RON</b> STREET ADDRESS: <b>9400 LAZY LANE</b> CITY - ST - ZIP: <b>TAMPA FL 33614-1518</b>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated in 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, changed or on an attachment with an address.

SIGNATURE: *Ronald J. Garner, Pres* DATE: **4-11-95** TYPE: **813-933-4024**  
SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR