

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

FILED
Feb 10 1997 8:00am
Secretary of State



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

PROFIT CORPORATION
ANNUAL REPORT
1997

DOCUMENT # 809876 (6)
1. Corporation Name:
REA CONSTRUCTION COMPANY



Principal Place of Business: P.O. BOX 32487 CHARLOTTE NC 28232 US
Mailing Address: PO BOX 32487 CHARLOTTE NC 28232-2487

3. Date Incorporated or Qualified: 01/01/1954
3a. Date of Last Report: 03/29/1996
4. FEI Number: 56-0493796
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: 24 Country: 25
2a. Mailing Address: 26 Suite, Apt. #, etc: 27 City & State: 28 Zip: 29 Country: 30

9. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	V	<input type="checkbox"/> DELETE
NAME	HAVENER, DANIEL L.	
STREET ADDRESS	3000 DAVENTRY LANE	
CITY-ST-ZIP	RALEIGH N.	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	O'CONNOR, DENNIS B.	
STREET ADDRESS	640 WHITEHURST LANAING RD.	
CITY-ST-ZIP	VA. BEACH VA	
TITLE	V	<input type="checkbox"/> DELETE
NAME	SNOW, CHARLES R	
STREET ADDRESS	BOX 3846	
CITY-ST-ZIP	WEST COLUMBIA S.	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	TATE, C. K.	
STREET ADDRESS	6135 PARK SOUTH, STE. 400	
CITY-ST-ZIP	CHARLOTTE NC	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	FERRELL, J.M.	
STREET ADDRESS	6135 PARK SOUTH SUITE 400	
CITY-ST-ZIP	CHARLOTTE NC	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	COPELAND, J.W.	
STREET ADDRESS	6135 PARK SOUTH SUITE 400	
CITY-ST-ZIP	CHARLOTTE NC	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	S PRESLAR, N.H.	
1.3 STREET ADDRESS	6135 PARK SO. - SUITE 400	
1.4 CITY-ST-ZIP	CHARLOTTE, N.C 28210	
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 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: Jim M. Ferrell (PHONED)
DATE: 1/7/97 DAYTIME PHONE: 704-513-6500

CR2E034 (9/96)