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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 820135

(2)

HALL CONTRACTING CORPORATION

APPROVED

1998 JAH 13 FH 1: 23

SECRETARY OF STATE TALLAHASSEF, FLORIDA



Principal Place of Business Mailing Address							.U. 81014 B7011 B101	II Bab ar abar	
6415 LAKEVIEW ROAD PO BOX 560218 CHARLOTTE NG 28256		6415 LAKEVIEW ROAD PO BOX 560218 CHARLOTTE NC 28256		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified					
						12/27/1966			
─ `	lace of Business	2a. Mailing Address	Mailing Address			4. FEI Number		oplied For	
Suite, Apt.	# ato	Suite Ant # etc	Suite, Apt. #, etc.			61-0489373		ot Applicable	
22	m, 610.	27				5. Certificate of Status Desired		Additional equired	
City & State	9	City & State				6. Election Campaign Financing Trust Fund Contribution		May Be	
Zip Country		Zip	Zip Country			Trust Fund Contribution			
24	25 29 30			Personal Property Tax due June 30. Yes 🔼 No		1			
<u> </u>	9. Name and Address of Current					10. Name and Address of New Registered	i Agent		
CT	CORPORATION SYSTEM			81	Name				
1200 S. PINE ISLAND ROAD				82	Street Aridr	Address (P.O. Box Number is Not Acceptable)			
PLANTATION FL 33324									
				83					
				84	City	FI	85 Zip	Code	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	es, the al	0000-	named corp	poration submits this statement for the purpose	of changing it	ts registered	
agent. I a	m familiar with, and accept the obligat	ions of, Section 607.0505, Fic	orida Stat	utes.	ne corporati	lion's board of directors. I hereby accept the ap	pointment as	regisierea	
SIGNATURE									
	Signature, typed or printed name of registered agent			d Agent	signature require	red when reinstating) DATE			
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AN			
TALE	_		1.1 111			500002400		Addition	
NAME	HALL, KENNETH E.		1.2 NAME			-01/14/980			
STREET ADDRESS	5596 ESCONDIDA BLVD. ST. PETERSBURG FL 33715			1.3 STREET ADDRESS		****150.00	非米米米] [50.00	
CITY-ST-ZIP				TY-ST-	ZIP		Change	Addition	
TITLE	44514 100014400 IA		2.1 10				[] Change	L.J Addition	
NAME	4106 WILD PARTRIDGE DR.			2.2 NAME 2.3 STREET ADDRESS					
STREET ADDRESS	CHARLOTTE NC 28226								
CITY-ST-ZIP TITLE	VD DELETE			2. 4 CITY - ST - ZIP 3.1 TITLE			Change	Addition	
NAME	DILL PORA LAL		3.1 W				Sumings	,	
STREET ADDRESS	ALC THOROUGHOUSE LAND				DDRESS				
CITY-ST-ZIP	PLIZADED GOVERNING ANDA		1	nee i Ai (14 - \$1 -					
TITLE			4.1 111		EII .		Change	Addition	
NAME	LOHER, BRIAN H.		4.2 N						
STREET ADDRESS	109 N. BRACKENBURY LANE		1		DORESS				
CITY-ST-ZIP	OLIADI ATTE NO AAATA			TY-ST-					
TITLE	V	DELETE	5.1 1(1				Change	Addition	
NAME	411,000,000,000		5.2 NA						
STREET ADDRESS	1106 BLACKTHORN ROAD				DORESS				
CITY-ST-ZIP	LOUISVILLE KY 40299			TY-ST-	ZIP			Λ Ι	
TITLE	V	DELETE	6 1 TIT	-		· · · · · · · · · · · · · · · · · · ·	Change	Addition	
NAME -	MCCARTHY, MICHAEL		6.2 NA	ME			. 14	6° 109)	
STREET ADDRESS	154 PERTHWOOD DR		6.3 ST	REET AL	DDRESS 1	112 Anchor Lane	Sh.	1/5/10	
CITY-ST-ZIP	WD 01 FT 4444 440 4044			1Y-SI-	_	Froutman, NC 28166	71	! · ~	

14. Thereby 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 regular empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or or an attagmment with an address.