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Apr 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **839066**

(8)

1. Corporation Name

JE MERIT CONSTRUCTORS, INC.

Principal Place of Business

**251 S. LAKE AVENUE
PASADENA CA 91101-0063**

Mailing Address

**251 S. LAKE AVENUE
PASADENA CA 91101-3003
US**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/07/1977	3a. Date of Last Report 04/23/1996
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 74-1712438	Applied For ☐ Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No	

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

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SVD	1.1 TITLE	President/Director
NAME	DIXON, JAMES E	1.2 NAME	Dixon, James E
STREET ADDRESS	4848 LOOP CENTRAL DRIVE	1.3 STREET ADDRESS	4848 Loop Central Drive
CITY-ST-ZIP	HOUSTON TX	1.4 CITY-ST-ZIP	Houston, TX
TITLE	S	2.1 TITLE	
NAME	MARKLEY, III W C	2.2 NAME	
STREET ADDRESS	251 S. LAKE AVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	PASADENA CA	2.4 CITY-ST-ZIP	
TITLE	T	3.1 TITLE	
NAME	PROSSER, JR J W	3.2 NAME	
STREET ADDRESS	251 S. LAKE AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	PASADENA CA	3.4 CITY-ST-ZIP	
TITLE	VP	4.1 TITLE	
NAME	DUFOUR, JOSEPH L.	4.2 NAME	
STREET ADDRESS	4848 LOOP CENTRAL DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	HOUSTON TX	4.4 CITY-ST-ZIP	
TITLE	PD	5.1 TITLE	Director
NAME	BOUTWELL, D.J.	5.2 NAME	Boutwell, D.J.
STREET ADDRESS	4949 ESSEN LANE	5.3 STREET ADDRESS	4848 Loop Central Drive
CITY-ST-ZIP	BATON ROUGE LA	5.4 CITY-ST-ZIP	Houston, TX 77081
TITLE	D	6.1 TITLE	
NAME	KERLER, WILLIAM R	6.2 NAME	
STREET ADDRESS	251 S. LAKE AVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	PASADENA CA	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:

RE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/97

Date

(818) 449-2171

Daytime Phone #

0502703

CR2E034 (9/96)