

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

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # H23523 (4)
1. Corporation Name
TRACEY CONSTRUCTION, INC.



Principal Place of Business: **1248 VISCAYA PKWY CAPE CORAL FL 33990**
Mailing Address: **1248 VISCAYA PKWY CAPE CORAL FL 33990**

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30

3. Date Incorporated or Qualified: **10/01/1984**
3a. Date of Last Report: **04/21/1995**
4. FEI Number: **59-2532516**
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 Statute: Yes No

9. Name and Address of Current Registered Agent
**HALICZER, JAMES S.
301 E. LAS OLAS BLVD.
FT LAUDERDALE FL 33302**

10. Name and Address of New Registered Agent
81 Name: **JAMES S. HALICZER**
82 Street Address (P.O. Box Number is Not Acceptable): **101 N.E. 3RD AVENUE**
84 City: **FT. LAUDERDALE, FL** 85 Zip Code: **33301**

11. Pursuant to the provisions of Sections 607.0602 and 607.0605, 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0605, Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	PTD	[] DELETE
NAME	TRACEY, DAVID G.	
STREET ADDRESS	1248 VISCAYA PKWY	
CITY-ST-ZIP	CAPE CORAL FL	
TITLE	V	[] DELETE
NAME	TRACEY, JOSEPH H.	
STREET ADDRESS	1248 VISCAYA PKWY	
CITY-ST-ZIP	CAPE CORAL FL	
TITLE	S	[] DELETE
NAME	TRACEY, KAREN L.	
STREET ADDRESS	1248 VISCAYA PKWY	
CITY-ST-ZIP	CAPE CORAL FL	
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	[] Change [] Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 NAME	[] Change [] Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	[] Change [] Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	[] Change [] Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	[] Change [] Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	[] Change [] Addition
62 NAME	
63 STREET ADDRESS	
64 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 on this annual report or supplement to 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 services or business enterprise, I have signed this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or change of or on an attached form with an address.

SIGNATURE: *Karen Tracey* KAREN L. TRACEY *Sec* 3/19/96 941-574-4900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Digitized Page

CR2E034 (12/95)