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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996 H64821

121

DOCUMENT # H64821 (2) 1. Corporation Name TRI-STATE CONTRACTORS OF FLORIDA, INC.									
Principal Place of Business		Mai	iling Address			† 1001011 0110 01111 0100 10110 11	801 1101 01911 1	ALBIT ETFIT ATOR	A1011 01013 1001
2001 FAYE ROAD P.O. BOX 26308		3 F	3051 FAYE ROAD P.O. BOX 26308						
JACKSONVILL	E FL 32226	J	IACKSONVILLE FL 322	226		3. Date Incorporated or Qualified 07/02/1985		ate of Last Re 03/06/19	
. Principal Plac	ce of Business	2a.	Mailing Address			4. FEI Number		1	Applied For
Ä	Thropart lace of bosiness		26			59-2554201	Not Applicable \$8.75 Additional		
Suite, Apt. #,	, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional Required
City & State		27	City & State			6. Election Campaign Financing			
City & State		28	Only a come			Trust Fund Contribution		Added	d to Fees
Zip	Country		Zip	Country	y	8. This corporation has liability for		tax under s	199.032,
1	25	29		30		10. Name and Address of New	es ∐No Boolstore	d Agent	
	9. Name and Address of Curr	rent Regist	ered Agent	81	Name	10. Name and Address of New	negistere	o Agent	
						Street Address (P.O. Box Number is Not Acceptable)			
PONSELL WALTER R. 10844 ALTA DR JACKSONVILLE FL 32226					Street Addr				
					 				
JACKSO	NVILLE PL 32220				<u> </u>			. 85 Zu	p Code
					H Gity		F	1 63 2	7 0000
or registere familiar with	o the provisions of Sections 607.05 of agent, or both, in the State of Fi n, and accept the obligations of, Se			es, the above	1	ration submits this statement for the pard of directors. Thereby accept the ap	aurocee of c	changing its r	egistered offici i agent. I am
or registere familiar with		ection 607.0	Change was authorize 0505, Florida Statutes 마마소하 (YC	es, the above ed by the com	named corpor poration's boa	ration submits this statement for the pard of directors. Thereby accept the against the resulting ADDITIONS/CHANGES TO O	ourpose of continuent	changing its r as registered ND DIRECTO	DRS IN 12
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TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE:

03/13/96 Date

904-751-3842

Elaytone Phone #