

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **J07727 (7)**
1. Corporation Name
CONSTRUCTION UNLIMITED OF NORTH FLORIDA, INC.



Principal Place of Business Mailing Address
**2656 BANTRY BAY
TALLAHASSEE FL 32308**

2. Principal Place of Business 2a. Mailing Address
21 **1400 Metropolitan** 26 **1400 Metropolitan**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 **#215** 27 **#215**
City & State City & State
23 **TALLAHASSEE FL** 28 **TALLAHASSEE FL**
Zip Zip
24 **32308** 25 **Leon** 29 **32308** 30

3. Date Incorporated or Qualified **04/04/1986** 3a. Date of Last Report **07/19/1995**
4. FEI Number **59-2668594** Applied For
Not Applicable
5. Certificate of Status Desired ☐ **\$8.75 Additional**
Fee Required
6. Election Campaign Financing ☐ **\$5.00 May Be**
Trust Fund Contribution Added to Fees
8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent
DRAKE, JEFF H. 81 Name **DRAKE, Jeff H**
2656 BANTRY BAY 82 Street Address (P.O. Box Number is Not Acceptable) **1400 Metropolitan #215**
TALLAHASSEE FL 32308 83
84 City **TALLAHASSEE** FL 85 Zip Code **32308**

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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]* DATE **FEB 5, 1996**

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE **P** 1.1 TITLE **P** Change ☒ Addition ☐
1.2 NAME **DRAKE, Jeff H.** 1.2 NAME **DRAKE, Jeff H.**
1.3 STREET ADDRESS **1400 Metropolitan #215**
1.4 CITY-ST-ZIP **TALLAHASSEE FL 32308** Change ☐ Addition ☐
2.1 TITLE ☐ DELETE 2.1 TITLE ☐ Change ☐ Addition ☐
2.2 NAME ☐ DELETE 2.2 NAME ☐ Change ☐ Addition ☐
2.3 STREET ADDRESS ☐ DELETE 2.3 STREET ADDRESS ☐ Change ☐ Addition ☐
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3.1 TITLE ☐ DELETE 3.1 TITLE ☐ Change ☐ Addition ☐
3.2 NAME ☐ DELETE 3.2 NAME ☐ Change ☐ Addition ☐
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4.1 TITLE ☐ DELETE 4.1 TITLE ☐ Change ☐ Addition ☐
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4.3 STREET ADDRESS ☐ DELETE 4.3 STREET ADDRESS ☐ Change ☐ Addition ☐
4.4 CITY-ST-ZIP ☐ DELETE 4.4 CITY-ST-ZIP ☐ Change ☐ Addition ☐
5.1 TITLE ☐ DELETE 5.1 TITLE ☐ Change ☐ Addition ☐
5.2 NAME ☐ DELETE 5.2 NAME ☐ Change ☐ Addition ☐
5.3 STREET ADDRESS ☐ DELETE 5.3 STREET ADDRESS ☐ Change ☐ Addition ☐
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6.1 TITLE ☐ DELETE 6.1 TITLE ☐ Change ☐ Addition ☐
6.2 NAME ☐ DELETE 6.2 NAME ☐ Change ☐ Addition ☐
6.3 STREET ADDRESS ☐ DELETE 6.3 STREET ADDRESS ☐ Change ☐ Addition ☐
6.4 CITY-ST-ZIP ☐ DELETE 6.4 CITY-ST-ZIP ☐ Change ☐ Addition ☐

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 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 to this report.

SIGNATURE: *[Signature]* SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE **FEB 5 1996** 904 385-6030

CP2E034 (12/95)