

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 # **L39256** (7)
1. Corporation Name
A.G. PIFER CONSTRUCTION CO., INC.



Principal Place of Business Mailing Address
**3629 OLD DELAND RD
56 GENERAL DOOLITTLE
DAYTONA BEACH FL 32124
US**

3. Date Incorporated or Qualified **12/22/1989** 3a. Date of Last Report **06/13/1995**

2. Principal Place of Business 2a. Mailing Address
21 **3629 Old Deland Rd.** 26 **3629 Old Deland Rd.**
State, Apt #, etc. State, Apt #, etc.
22 City & State 27 City & State
Daytona Beach, FL **Daytona Beach, FL**
23 Zip Country 28 Zip Country
32124 Volusia **32124 Volusia**
24 25 29 30

4. FEI Number **59-2986219** Applied For Not Applicable
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 Statutes Yes No

9. Name and Address of Current Registered Agent
**PIFER, ANTHONY G.
56 GENERAL DOOLITTLE
DAYTONA BEACH FL 32124**

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 607.02 and 607.12, 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 607.02, Florida Statutes.

SIGNATURE: *[Signature]* DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD PIFER, ANTHONY G. 56 GENERAL DOOLITTLE DAYTONA BEACH FL	<input type="checkbox"/> DELETE	1. TITLE
NAME			2. NAME
STREET ADDRESS			3. STREET ADDRESS
CITY-ST-ZIP			4. CITY-ST-ZIP
TITLE	VD PIFER, GEORGE M. 2424 BEAHC AVE APOPKA FL	<input type="checkbox"/> DELETE	5. TITLE
NAME			6. NAME
STREET ADDRESS			7. STREET ADDRESS
CITY-ST-ZIP			8. CITY-ST-ZIP
TITLE	ST PIFIER, ALICE R 1703 MAGNOLIA AVE LOT 4A S DAYTONA FL	<input type="checkbox"/> DELETE	9. TITLE
NAME			10. NAME
STREET ADDRESS			11. STREET ADDRESS
CITY-ST-ZIP			12. CITY-ST-ZIP
TITLE		<input type="checkbox"/> DELETE	13. TITLE
NAME			14. NAME
STREET ADDRESS			15. STREET ADDRESS
CITY-ST-ZIP			16. CITY-ST-ZIP
TITLE		<input type="checkbox"/> DELETE	17. TITLE
NAME			18. NAME
STREET ADDRESS			19. STREET ADDRESS
CITY-ST-ZIP			20. 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 in this annual report or other financial and other 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 officer 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, changed, or on an addition, with an address.

SIGNATURE: *[Signature]* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
904-257-4448

CRE034 (12/95)