

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

**Mar 02 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P18257 (6)
1. Corporation Name
PCL CIVIL CONSTRUCTORS, INC.



Principal Place of Business 9900 WEST SAMPLE RD., SUITE #203 SUITE 203 CORAL SPRINGS FL 33065	Mailing Address 9900 WEST SAMPLE RD., SUITE #203 SUITE 203 CORAL SPRINGS FL 33065
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country

3. Date Incorporated or Qualified 03/02/1988	
4. FEI Number 84-0915605	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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
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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	BENNETT, J.P.	
STREET ADDRESS	2000 S. COLORADO BLVD.	
CITY-ST-ZIP	DENVER CO 80222	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	THOMPSON, J. D	
STREET ADDRESS	5410 99 ST	
CITY-ST-ZIP	EDMONTON, ALBERTA, CAN	
TITLE	ST	<input checked="" type="checkbox"/> DELETE
NAME	HOSTYN, D. L	
STREET ADDRESS	2000 S. COLORADO BLVD.	
CITY-ST-ZIP	DENVER CO 80222	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	HARDER, J. D.	
STREET ADDRESS	9900 W. SAMPLE RD. #203	
CITY-ST-ZIP	CORAL SPRINGS FL	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	TIGHE, S. A.	
STREET ADDRESS	9900 W. SAMPLE RD. #203	
CITY-ST-ZIP	CORAL SPRINGS FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	CLARK, W. W	
STREET ADDRESS	2000 S COLORADO BLVD	
CITY-ST-ZIP	DENVER CO	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	BENNETT, J.P.	
1.3 STREET ADDRESS	2000 S. COLORADO BLVD.	
1.4 CITY-ST-ZIP	DENVER CO 80222	
2.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	HARDER, J.D.	
2.3 STREET ADDRESS	9900 WEST SAMPLE RD.; STE. 203	
2.4 CITY-ST-ZIP	CORAL SPRINGS, FL 33065	
3.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	TENNOCK, N.C.	
3.3 STREET ADDRESS	1620 WEST FOUNTAINHEAD PKWY. #290	
3.4 CITY-ST-ZIP	TEMPE, ARIZONA 85282	
4.1 TITLE	ST	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	HOSTYN, D.L.	
4.3 STREET ADDRESS	2000 S. COLORADO BLVD.	
4.4 CITY-ST-ZIP	DENVER, CO 80222	
5.1 TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	TIGHE, S.A.	
5.3 STREET ADDRESS	9900 WEST SAMPLE RD.; STE. 203	
5.4 CITY-ST-ZIP	CORAL SPRINGS, FL 33065	
6.1 TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	EVELD, M. R.	
6.3 STREET ADDRESS	9900 WEST SAMPLE RD.; STE. 203	
6.4 CITY-ST-ZIP	CORAL SPRINGS, FL 33065	

14. I 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.

CR2E034 (10/97)