

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

FILED
Feb 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P24481** (4)
1. Corporation Name
U.S. GENERAL CONSTRUCTION, INC.

Principal Place of Business 11245 OLD ROSWELL ROAD ALPHARETTA GA 30201	Mailing Address 11245 OLD ROSWELL ROAD ALPHARETTA GA 30201
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/24/1989	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 58-1032448		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23 Zip	28 Country	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24	25	7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No			
29	30				

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	
		FL 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 _____ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	☐ Change ☐ Addition
NAME	PEDEN, RICHARD H.	1.2 NAME	
STREET ADDRESS	4645 CANDACRAIG	1.3 STREET ADDRESS	
CITY-ST-ZIP	ALPHARETTA GA	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	☐ Change ☐ Addition
NAME	PEDEN, JO K	2.2 NAME	
STREET ADDRESS	4645 CANDACRAIG	2.3 STREET ADDRESS	
CITY-ST-ZIP	ALPHARETTA GA	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	☐ Change ☐ Addition
NAME	PHILLIPS, JEAN	3.2 NAME	
STREET ADDRESS	8468 MAJORS ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	CUMMING GA	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	PERRY, RICHARD P.	4.2 NAME	
STREET ADDRESS	1175 CANTON STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	ROSWELL GA	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	RODGERS, JOSEPH O.	5.2 NAME	
STREET ADDRESS	5380 PEACHTREE IND. BL.	5.3 STREET ADDRESS	
CITY-ST-ZIP	NORCROSS GA	5.4 CITY-ST-ZIP	
TITLE	V	6.1 TITLE	☐ Change ☐ Addition
NAME	PEDEN, RICHARD H JR	6.2 NAME	
STREET ADDRESS	4855 ST KEVIN CT	6.3 STREET ADDRESS	
CITY-ST-ZIP	SUWANEE GA	6.4 CITY-ST-ZIP	

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.

SIGNATURE: *Richard H Peden Jr* 2-5-98 770442-3334

CP2E034 (10/97)