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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000010691 (3)

CON-DOCK, INC.

## FILED May 05 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address					
1112 HIGHLAND LAKES CIRCLE BIRMINGHAM AL 35242		1112 HIGHLAND LAKES CIRCLE BIRMINGHAM AL 35242					
DILIMITORNIA	HL OVETE	Dillimitation of ANE	76		DO NOT WRITE IN T	HIS SPACE	
					3. Date Incorporated or Qualified		
					12/04/1992		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	I A	pplied For
ज		26	26		34-1336551	N	ot Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75	Additional
22		27	27		5. Certificate of Status Desired	Fee R	equired
City & State	9	City & State		.,	6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution		to Fees
Zip Country		Zip Country		try	8. This corporation owes or has paid the current year Intangible		
4	25 29		30		Personal Property Tax due June 30. Yes No		
	9, Name and Address of Curre	ent Registered Agent			10. Name and Address of New Registe	red Agent	
WII	LS, PAUL W I		ε	Name			
	290 HIDDEN RIVER CT			0 0	Address (P.O. Box Number is Not Acceptable)		
	NITA SPRINGS FL 33923		*	Street A	Address (P.O. Box Number is Not Acceptable)		
-			1	33	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1		
			3	City	1	FL 85 Zip	Code
44 Discound	to the provisions of Continue 607 Of	02 and 607 1609 Florida Ct	alutae the abo		corporation submits this statement for the purpo		te registered
office or r	edistered agent, or both, in the Stat	le of Florida. Such change w	as authorized.	by the corp	oration's board of directors. I hereby accept the	appointment as	registered
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0505	, Florida Statu	tes.			
SIGNATURE							
15	Signature, typed or printed name of registered a	Upont and time if applicable	<del> </del>	Agent signature i	required when reinstating) DA  ADDITIONS/CHANGES TO OFFICERS		DC IN 12
12.	OFFICERS AI	DELETE	13.	,	ADDITIONS/CHANGES TO OFFICERS	Change	Addition
TITLE	WILLS, PAUL W I					□ Grange	
NAME	1112 HIGHLAND LAKES CIR	CLE	1.2 NAN				
STREET ADDRESS	BIRMINGHAM AL 35242	IOLE		EET ADDRESS			
CITY-ST-ZIP		Decemen		r-ST-ZIP		Channe	Addition
TITLE	8	☐ DELETE	2.1 TITL			L Change	Addition
NAME	WILLS, RUTH L	NO P	2.2 NAN	AE			
STREET ADDRESS	1112 HIGHLAND LAKES CIR	ICLE	2.3 \$1R	EET ADDRESS			
CITY-ST-ZIP	BIRMINGHAM AL 35242		2. 4 CIT	Y-ST-ZIP			
TITLE		L DELETE	3.1 TITL	E		∐ Change	Addition
NAME			3.2 NAN	AE			
STREET ADDRESS			3.3 STR	EET ADDRESS			
CITY-ST-ZIP			3 4. CIT	Y-ST-ZIP			
TITLE		DELETE	4.1 TITL	E T	-	Change	Addition
NAME			4. 2 NAI	ME			
STREET ADDRESS			4.3 STR	eet address			
CITY-ST-ZIP			4.4 CITY	r-ST-ZIP			
TITLE		DELETE	51 TITL			Change	Addition
NAME			5.2 NAN	AE .			
STREET ADDRESS			1	EET ADDRESS			
CITY-ST-ZIP				7-S1-ZIP			
TITLE		DELETE	6.1 TITL			Change	Addition
			6.2 NAN			<u> </u>	
NAME PROFEE APPROFES				- 1			
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP				r-St-ZIP	d in Section 119.07(3)(i). Florida Statutes. I furth		1
44   6							

4. 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.

2 001 1/1/6 Day 11 1/1/6 4-2-- GE 205998007