

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

FILED
May 01 1996 8:00 am
Secretary of State

DOCUMENT # P93000080213 (0)

1. Corporation Name
FIRST GENERAL SERVICES RESTORATION, INC.



Principal Place of Business: 205 CENTURY BLVD BARTOW FL 33830
Mailing Address: 205 CENTURY BLVD BARTOW FL 33830

3. Date Incorporated or Qualified: 11/12/1993
3a. Date of Last Report: 04/25/1995

21	2. Principal Place of Business	26	2a. Mailing Address	4.	FEI Number 59-3208463	Applied For	Not Applicable
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.	5.	Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required
23	City & State	28	City & State	6.	Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Zip	29	Zip	8.	This corporation has liability for intangible tax under s 199.032, Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
25	Country	30	Country				

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
LOCKE, CARL E JR 205 CENTURY BLVD BARTOW FL 33830				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	OV	<input type="checkbox"/> DELETE		1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BEASLEY, DANNY			1.2 NAME			
STREET ADDRESS	205 CENTURY BLVD.			1.3 STREET ADDRESS			
CITY-ST-ZIP	BARTOW FL			1.4 CITY-ST-ZIP			
TITLE	DV	<input checked="" type="checkbox"/> DELETE		2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MCENDREE, PATRICIA			2.2 NAME			
STREET ADDRESS	205 CENTURY BLVD.			2.3 STREET ADDRESS			
CITY-ST-ZIP	BARTOW FL			2.4 CITY-ST-ZIP			
TITLE	DS	<input checked="" type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LOCKE, CARL E			3.2 NAME			
STREET ADDRESS	205 CENTURY BLVD			3.3 STREET ADDRESS			
CITY-ST-ZIP	BARTOW FL 33830			3.4 CITY-ST-ZIP			
TITLE	DT	<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LOCKE, SHANE			4.2 NAME			
STREET ADDRESS	205 CENTURY BLVD			4.3 STREET ADDRESS			
CITY-ST-ZIP	BARTOW FL 33830			4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	DP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME				5.2 NAME	Locke Carl E. Jr.		
STREET ADDRESS				5.3 STREET ADDRESS	205 Century Blvd		
CITY-ST-ZIP				5.4 CITY-ST-ZIP	Bartow FL 33830		
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 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 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: *Carl E. Locke* DATE: 4/29/96 DAYTIME PHONE: 533-7193

CR2E034 (12/95)