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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State **DIVISION OF CORPORATIONS**

POCUMENT # P96000023415 (8)

MAYO CONSTRUCTION & DESIGN, INC.

								11 1	
Principal Plac	e of Business	Ma	ailing Address				4 LUBRICOUS TOU TOUR DEEPE ORIGINE BUSINE BUSINE NOVING CLOSE CULLU GLUBER CHARL USINE II	111	
5385 HWY 29 N 5385 HWY 29 N MOLINO FL 32577 MOLINO FL 32577-4741									
							3. Date Incorporated or Qualified 3a. Date of Last Report 03/15/1996		
2. Principal P	Place of Businoss	28.	Mailing Address				4. FEI Number Applied	For	
21		26	26				59-3363780 Not App	olicable	
Sulte, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Addition	onal	
22		27					Fee Require	id	
City & State			City & State				6. Election Campaign Financing \$5.00 May	Be	
23		28]					Trust Fund Contribution Added to Fee	es	
—, ^{Zịp}	Country		Zip	L Cou	intry		8. This corporation has liability for intangible tax under s. 199.	.032,	
24	[25]	29		30			Florida Statutos Yes No		
	9. Name and Address of Curren	Regist	ered Agent		241		10. Name and Address of New Registered Agent		
	YO, JESSIE W				81	Name			
	5 HWY 29 N				82	Street Add	dress (P.O. Box Number is Not Acceptable)		
Fig. MOI	LINO FL 32577								
.3					83				
					В4	City	85 Zip Code		
							rporation submits this statement for the purpose of changing its registation's board of directors. I hereby accept the appointment as registation's		
SIGNATURE	Signature, typed or printed name of registered age: OFFICERS AND			E: Registeres	d Ager	nt signature requ	ulied when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	12	
TITLE			DELETE	1.1 TE	ILE	F	Change		
NAME :				1.2 NA	AME	-		,	
STREET ADDRESS				13 ST	REET	ADDRESS J	Jessie W. Mayo		
CITY-ST-ZIP				1 <u>4</u> CI	1Y-S1	I-ZIP 5	5385 Hwy. 29 North Molino, FL	225	
TITLE	DELE1E			2111	21 TITLE VP		Dessie W. Mayo 5385 Hwy. 29 North Molino, FL VP	Addition	
NAME				2.2 NA	ME		David E. Mayo		
STREET ADDRESS				2.3 ST	REET.	ADDRESS 5	5385 Hwy. 29 North		
CITY-ST-ZIP				2.4 C		1-7IP M	Molino, FL 32577		
TITLE			L] DELETE	3.1 711		ν	/P Change XX	Addition	
NAME				3.2 NA		F	E. Bryan Nisewonger		
STREET ADDRESS						1 d	1400 Molino Meadows Drive		
CITY-\$T-ZIP			DELETE	3 4. C		1-11-	· · · · · · · · · · · · · · · · · · ·	B d d d d a a	
TITLE			□ ntttt	4.1 1#			VX	Addition	
NAME	{			4.2 N		ſ	S/T		
STREET ADDRESS						ADDRESS G	Ginger C. Mayo		
CITY-ST-ZIP TITLE	<u> </u>		DELETE	4.4 CI 5.1 111		5	5385 Hwy - 29 North Moling Fl	4dd 2	
NAME			preef	5.2 NA		1	. Change Ci	Naumon	
STREET ADDRESS	N. C.			1		ADDDCCC			
CITY-ST-ZIP	A STATE OF THE STA					ADDRESS		ļ	
TITLE			DELETE	5 4 CF 6 1 TH		-or	Change [Addition	
NAME			pand Press.	62 NA		1	وي ماهالهان كي		
STREET ADDRESS						ADDRESS			
CITY+\$T-ZIP	1			6.4 CI					
UITTOL'LIF	l			0.9 CI	11-01	- cir 1			

14. I do 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 logal 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.

Ginger C. Mayo

rase r. Mauh

4-16-97 (904) 587 - 4055

FILED

Apr 21 1997 8:00am

Secretary of State