FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

7:30

DOCUMENT # 646970 (4)

1. Current Name
LYTELL MCALLISTER CONSTRUCTION, INC.

TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
16401 SW PALOMINO STREET P.O. BOX 253 INDIANTOWN FL 34956	16401 SW PALOMINO STREET P.O. BOX 253 INDIANTOWN FL 34956

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/03/1979
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business (21)
2a. Mailing Address (26)
4. FEI Number: 59-1955367 ☐ Applied For ☐ Not Applicable
Suite, Apt. #, etc. (22) / Suite, Apt. #, etc. (27)
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
City & State (23) / City & State (28)
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
Zip (24) County (25) / Zip (29) County (30)
8. The corporation has filed, or is exempt, for income tax under S. 199.032, Florida Statutes ☐ Yes XX No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MCALLISTER, CARROLL S. 16401 S.W. PALOMINO STREET INDIANTOWN FL 33456	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 607.0501 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 (Typed or printed name of Registered Agent and title if applicable) (If Registered Agent is an artificial entity) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 Title	PD	71 Title	☐ Change ☐ Addition
12 Name	MCALLISTER, LYTELL	72 Name	
13 Street Address	16401 S.W. PALOMINO ST.	73 Street Address	
14 City-St-Zip	INDIANTOWN FL	74 City-St-Zip	
21 Title	SD	75 Title	☐ Change ☐ Addition
22 Name	MCALLISTER, CARROLL S.	76 Name	
23 Street Address	16401 S.W. PALOMINO ST.	77 Street Address	
24 City-St-Zip	INDIANTOWN FL	78 City-St-Zip	
31 Title		79 Title	☐ Change ☐ Addition
32 Name		80 Name	
33 Street Address		81 Street Address	
34 City-St-Zip		82 City-St-Zip	
41 Title		83 Title	☐ Change ☐ Addition
42 Name		84 Name	
43 Street Address		85 Street Address	
44 City-St-Zip		86 City-St-Zip	
51 Title		87 Title	☐ Change ☐ Addition
52 Name		88 Name	
53 Street Address		89 Street Address	
54 City-St-Zip		90 City-St-Zip	
61 Title		91 Title	☐ Change ☐ Addition
62 Name		92 Name	
63 Street Address		93 Street Address	
64 City-St-Zip		94 City-St-Zip	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions 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 11 or Block 13 above, or on an attachment with an address.

4-27-95

SIGNATURE: Carroll S. McAllister Carroll S. McAllister 407-597-2214
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OR OFFICER (Title) (Daytime Phone #)

0464008 FP