FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

DOCUMENT # P93000037567 (3)

1. CENTRAL FLORIDA CONSTRUCTION, INC.

6926 ALOMA AVE.
WINTER PARK FL 32792

6926 ALOMA AVE.
WINTER PARK FL 32792

3. Date Incorporated or Qualified: 05/25/1993
3a. Date of Last Report: 05/01/1994

2. FEI Number: 59-3184702 — Applied For / Not Applicable

5. Certificate of Status Desired: $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

SANTORE, FRANK
6926 ALOMA AVENUE
WINTER PARK FL 32792

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 Section 607.325, or 617.0501, Florida Statutes, the above named corporation hereby acknowledges the resignation of its registered office or registered agent as stated in the Statement of Resignation filed with the Department of State. Having been duly authorized to do so, the corporation's board of directors hereby accept the appointment as registered agent. The registered agent has accepted the duties as set forth in Section 607.325, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS, IN 12	
TITLE	DP	TITLE	Change / Add
NAME	SANTORE, FRANK	NAME	
STREET ADDRESS	6926 ALOMA AVE.	STREET ADDRESS	
CITY, ST, ZIP	WINTER PARK FL 32792	CITY, ST, ZIP	
TITLE	DST	TITLE	Change / Add
NAME	HOLM, MICHAEL	NAME	
STREET ADDRESS	6926 ALOMA AVE.	STREET ADDRESS	
CITY, ST, ZIP	WINTER PARK FL 32792	CITY, ST, ZIP	
TITLE		TITLE	Change / Add
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY, ST, ZIP		CITY, ST, ZIP	
TITLE		TITLE	Change / Add
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY, ST, ZIP		CITY, ST, ZIP	
TITLE		TITLE	Change / Add
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY, ST, ZIP		CITY, ST, ZIP	
TITLE		TITLE	Change / Add
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY, ST, ZIP		CITY, ST, ZIP	

14. I hereby certify that the information indicated on this report or supplemental annual report, to the extent it is required to be kept current, is true and accurate and that my signature shall serve as the written confirmation of such facts pursuant to Section 607.0120(11)(b), Florida Statutes, and that my name appears above, or on an attached amendment, or on other legal documents on file with the Department of State for the corporation named in the report or amendment, and that my name appears above, or on an attached amendment, as an officer or director of the corporation or its successor in office.

SIGNATURE: F. Santore — 5/1/95 — (407) 657-8045

SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

0048679 CP