

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 465216 (0)

1. Corporation Name

W. CLYDE DANIEL CONSTRUCTION, INC.



Principal Place of Business

23203 CORTEZ BLVD.
BROOKSVILLE FL 34601
US

Mailing Address

5025 BASEBALL POND RD.
BROOKSVILLE FL 34602
US

2. Principal Place of Business

2a. Mailing Address

21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	City & State
24	Country	29	Zip
25	Country	30	Country

9. Name and Address of Current Registered Agent

DANIEL, WILLIAM C.
5025 BASEBALL POND RD
BROOKSVILLE FL 34602

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 607.0012 and 607.1504, 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

Signature of the person who is authorized to sign this statement

Signature of the person who is authorized to sign this statement

Date

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	DANIEL, WILLIAM C	
STREET ADDRESS	5025 BASEBALL POND RD	
CITY-STATE-ZIP	BROOKSVILLE FL 34602	
TITLE	VPD	☐ DELETE
NAME	DANIEL, WILLIAM M.	
STREET ADDRESS	4435 BASEBALL POND RD.	
CITY-STATE-ZIP	BROOKSVILLE FL	
TITLE	D	☐ DELETE
NAME	DANIEL, DORIS M	
STREET ADDRESS	5025 BASEBALL POND RD	
CITY-STATE-ZIP	BROOKSVILLE FL 34602	
TITLE	STD	☐ DELETE
NAME	BORGIALI, ANN D.	
STREET ADDRESS	7236 CLAYTON RD.	
CITY-STATE-ZIP	BROOKSVILLE FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	D	☒ Change ☐ Addition
2. NAME	Daniel, William C.	
3. STREET ADDRESS	5025 Baseball Pond Rd.	
4. CITY-STATE-ZIP	Brooksville, FL 34602	
5. TITLE	VPD	☒ Change ☐ Addition
6. NAME	Daniel, William M.	
7. STREET ADDRESS	4435 Baseball Pond Rd	
8. CITY-STATE-ZIP	Brooksville, FL 34602	
9. TITLE		☐ Change ☐ Addition
10. NAME		
11. STREET ADDRESS		
12. CITY-STATE-ZIP		
13. TITLE		☐ Change ☐ Addition
14. NAME		
15. STREET ADDRESS		
16. CITY-STATE-ZIP		
17. TITLE		☐ Change ☐ Addition
18. NAME		
19. STREET ADDRESS		
20. CITY-STATE-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(9)(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 in an attachment with an addres.

SIGNATURE:

Ann D. Borgiali, Sec/Treas.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/29/96 (352) 796-6930

CR2E034 (12/95)