

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 FEB - 1 PM 12:04

DOCUMENT # 150877 (9)

1. Corporation Name

CENTEX-ROONEY CONSTRUCTION CO., INC.

Principal Place of Business

6300 NW 5 WAY
FT LAUDERDALE FL 33309
US

Mailing Address

6300 NW 5 WAY
FT LAUDERDALE FL 33309
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/30/1947

3a. Date of Last Report

02/09/1994

4. FEI Number

59-0605016

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

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 607.0502 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	VP
NAME	SMITH, JAMES A.
STREET ADDRESS	6300 NW 5TH WAY
CITY-ST-ZIP	FT. LAUDERDALE FL
TITLE	S
NAME	SMERGE, RAYMOND G
STREET ADDRESS	3333 LEE PARKWAY
CITY-ST-ZIP	DALLAS, TX 0
TITLE	T
NAME	BAGLEY, ELDEN
STREET ADDRESS	6300 NW 5TH WAY
CITY-ST-ZIP	FT LAU, FL 00000
TITLE	PD
NAME	MOSS, BOB L.
STREET ADDRESS	6300 NW 5TH WAY
CITY-ST-ZIP	FT. LAUDERDALE FL
TITLE	V
NAME	SOUTHERN, RAYMOND C.
STREET ADDRESS	6300 NW 5TH WAY
CITY-ST-ZIP	FT LAUDERDALE FL
TITLE	VP
NAME	CAMMACK, JOHN W
STREET ADDRESS	6300 N.W. 5TH WAY
CITY-ST-ZIP	FORT LAUDERDALE FL

1.1 TITLE	V	☒ Change ☐ Addition
1.2 NAME	Wade, Frederick E.	
1.3 STREET ADDRESS	6300 N.W. 5th Way	
1.4 CITY-ST-ZIP	Ft. Lauderdale, FL. 33309	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
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 this 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Elden M. Bagley, Treasurer

Date

01/14/95

Daytime Phone #

(305) 771-7122