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Jan 29 1997 8:00am

Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 155325

(4)

1. Corporation Name  
LOGAN CONSTRUCTION COMPANY

Principal Place of Business

1200 WEST CASS STREET STE 101  
TAMPA FL 33606

Mailing Address

1200 WEST CASS STREET STE 101  
TAMPA FL 33606-1311

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 946 Quince Avenue  
Suite, Apt. #, etc.

27 City & State

28 Boulder, Colorado

29 Zip

80304-0703

30 Country

USA

9. Name and Address of Current Registered Agent

WILLIAM RAY LOGAN  
4510 SWANN AVE  
TAMPA FL 33606

3. Date Incorporated or Qualified

07/01/1948

3a. Date of Last Report

01/30/1996

4. FEI Number

59-0585200

Applied For

Not Applicable

5. Certificate of Status Desired

xx

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes

No

10. Name and Address of New Registered Agent

81 Name

William Ray Logan

82 Street Address (P.O. Box Number is Not Acceptable)

1200 West Cass Street, Suite 101

83

84 City

Tampa

FL

85 Zip Code

33606

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD ☐ DELETE

NAME LOGAN, WILLIAM RAY  
STREET ADDRESS 4510 SWANN AVENUE  
CITY-ST-ZIP TAMPA FL 33606

TITLE VD ☐ DELETE

NAME LOGAN, MINDY R  
STREET ADDRESS 4510 SWANN AVENUE  
CITY-ST-ZIP TAMPA FL 33606

TITLE SD ☐ DELETE

NAME LOGAN, CHARLOTTE J  
STREET ADDRESS 1200 W CASS ST, SUITE 101  
CITY-ST-ZIP TAMPA FL 33606

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PTD ☒ Change ☐ Addition

1.2 NAME Logan, William Ray  
1.3 STREET ADDRESS 946 Quince Avenue  
1.4 CITY-ST-ZIP Boulder, Colorado 80304-0703

2.1 TITLE VD ☒ Change ☐ Addition

2.2 NAME Logan, Mindy R.  
2.3 STREET ADDRESS 946 Quince Avenue  
2.4 CITY-ST-ZIP Boulder, Colorado 80304-0703

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 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 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 on an attachment with an address.

SIGNATURE:

W. Ray Logan, President 1/20/1997 (303) 4131263

CR2E034 (9/96)