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PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 208623

WARD RIDGE CONSTRUCTION COMPANY, INCORPORATED

Principal Plac	ce of Business	Mailing Address	Mailing Address 1331 W. CENTRAL BLYD.				
ORLANDO FL		ORLANDO FL 32905-175					
					3. Date Incorporated or Qualified 12/28/1957	3a. Date of Last I	Report
2. Principal f	Place of Business	2a. Mailing Address		4. FEI Number	A	pplied For	
21		26				lot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27		5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	7 _(D)	Zip Crountry		Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032,		
24	25 29 30			Florida Statutes Yes X No			
	9. Name and Address of Curre		15-11		10. Name and Address of New Re		
DEA	L, TROY M., JR.		81	Name			
	1 W. CENTRAL BLVD.		82 Street Add		fdress (P.O. Box Number is Not Acceptable)		
ORLANDO FL 32805							
			63				
			84	City		85 2ιρ	Code
11 Directions	to the provisions of Spellens 607 Of	02 and 607 1509. Upride Stat	tuton the about	o rowand con	poration submits this statement for the p	FL 63 2 1	ite particles and
office or	registered agent, or both, in the State	e of Horida. Such change wa	s authorized b	z the comora	tion's board of directors. Thereby accep	t the appointment as	s registered
	am familiar with, and accept the oblig	gations of, Section 607.0505,	Florida Statute	S.			
SIGNATURE	Signature, typed or printed name of registered as	gen) and tille diapplication (N	IOTE Registered Ag	not signature regul	red when reinstating)	DATE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTO	RS IN 12
TITLE	CP DILETE		1.1 100.6			Change	Addition
NAME	DEAL, TROY M., JR.		1.2 NAME				
STREET ADDRESS	1331 W. CENTRAL BLVD.		1.3 STREET	ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32805		1.4 CILY - S	II - ZIP			——————————————————————————————————————
TITLE	STD	☐ DETE 1F	211011		Chan		Addition
NAME	FOX, STEPHEN M.		2.2 NAME				
STREET ADDRESS	1331 W. CENTRAL BLVD.		2 3 \$18[[
CITY-ST-ZIP TITLE	ORLANDO FL 32805	☐ DELETE	2.4 C/TY- 3.1 TITLE	S1 - 7IP		Change	Addition
NAME		L) MUIT	3.1 HHE 3.2 NAME			Griange	First Control
STREET ADDRESS			3.3 STREET	ADDRESC			
CITY-ST-ZIP			3.4, CITY-]			
TITLE		DELFTE	4.1 TOLE	Y1571		Change	Addition
NAME			4. 2 NAME				_
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CHY- \$	j			
TITLE			517001			☐ Change	Addition
NAME			5.2 INAME				
STREET ADDRESS			5.3 STREE	ADDRESS			
CITY-ST-ZIP			5.4 jCi1Y+3	51 - ZIP			
TITLE		DELETE	6.1 TILLE			Change	Addition
NAME			6.2 NAME				
	1		0.0 (0.000)				

14. Ido hereby certify that the information supplied with this filling 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 eath; 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.

4/30/97

(407)849-6420

Stephen M. Fox