

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 218805 (0)
 1. Corporation Name
DERRICO CONSTRUCTION CORPORATION



Principal Place of Business 2225 AVOCADO AVENUE P O BOX 361177 MELBOURNE FL 32936-8177	Mailing Address 2225 AVOCADO AVENUE P O BOX 361177 MELBOURNE FL 32936-8177
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DO NOT WRITE IN THIS SPACE

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 Zip
24 Country	29 Country

3 Date Incorporated or Qualified 12/31/1958
4 FEI Number 59-0858994
5 Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6 Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
8 This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

SEGERSON, ROBERT A.
2245 MOCKINGBIRD LANE
INDIALANTIC FL 32903

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 _____ (NOT: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	SD	<input type="checkbox"/> DELETE
NAME	BEAR, DON T.	
STREET ADDRESS	327 PROVINCIAL DR	
CITY-ST-ZIP	INDIALANTIC FL	
TITLE	VDT	<input type="checkbox"/> DELETE
NAME	OLSON, KIM TYREE	
STREET ADDRESS	323 PROVINCIAL DR.	
CITY-ST-ZIP	INDIALANTIC FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	SEGERSON, R A	
STREET ADDRESS	2245 MOCKINGBIRD LANE	
CITY-ST-ZIP	INDIALANTIC FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SEGERSON, E., M	
STREET ADDRESS	2245 MOCKINGBIRD LANE	
CITY-ST-ZIP	INDIALANTIC FL	
TITLE	AVP	<input type="checkbox"/> DELETE
NAME	OLSON, JON	
STREET ADDRESS	323 PROVINCIAL DR	
CITY-ST-ZIP	INDIALANTIC FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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: *Kim Tyree Olson* **Kim Tyree Olson**
 Vice Pres/Treas April 10, 1998 407-254-2291

CFR2E034 (10/97)