FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 AM 8:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **219829** **(9)**

1. Corporation Name

B & H CONSTRUCTION & SUPPLY COMPANY, INC.

Principal Place of Business	Mailing Address
1747 MAINLINE DRIVE P O BOX 1139 QUINCY FL 32351	1747 MAINLINE DRIVE P O BOX 1139 QUINCY FL 32351

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **01/31/1959**	3a. Date of Last Report: **04/28/1994**
2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) / County (25)	Zip (29) / County (30)
4. FEI Number: **59-0869388** ☐ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ **$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	

9. Name and Address of Current Registered Agent

BAILEY,ERNEST G
613 WOODLAND AVE
QUINCY FL

10. Name and Address of New Registered Agent

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 _____ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when mandatory)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1 1 TITLE		☐ Change ☐ Addition
NAME	BAILEY, E LAMAR	1 2 NAME		
STREET ADDRESS	N STEWART STREET	1 3 STREET ADDRESS		
CITY-ST-ZIP	QUINCY, FLORIDA 0	1 4 CITY-ST-ZIP		
TITLE	D	2 1 TITLE		☐ Change ☐ Addition
NAME	PRIESTER, JAMES M	2 2 NAME		
STREET ADDRESS	825 MADERIA CIRCLE	2 3 STREET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE, FL 0	2 4 CITY-ST-ZIP		
TITLE	PD	3 1 TITLE		☐ Change ☐ Addition
NAME	BAILEY, GARY W	3 2 NAME		
STREET ADDRESS	1939 BUCKWOOD BLVD	3 3 STREET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE, FL 0	3 4 CITY-ST-ZIP		
TITLE	D	4 1 TITLE		☐ Change ☐ Addition
NAME	BETTS, GERALDINE M	4 2 NAME		
STREET ADDRESS	701 WOODLAND AVENUE	4 3 STREET ADDRESS		
CITY-ST-ZIP	QUINCY, FLORIDA 0	4 4 CITY-ST-ZIP		
TITLE	VD	5 1 TITLE		☐ Change ☐ Addition
NAME	BAILEY, ERNEST G	5 2 NAME		
STREET ADDRESS	613 WOODLAND AVENUE	5 3 STREET ADDRESS		
CITY-ST-ZIP	QUINCY, FLORIDA 0	5 4 CITY-ST-ZIP		
TITLE	T	6 1 TITLE		☐ Change ☐ Addition
NAME	BETTS, GERALDINE M	6 2 NAME		
STREET ADDRESS	701 WOODLAND AVENUE	6 3 STREET ADDRESS		
CITY-ST-ZIP	QUINCY, FLORIDA 0	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)(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: Geraldine M Betts 4/27/95 904-627-7244

SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

0080760 CP