

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

FILED

Feb 05 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 253964 (1)
1. Corporation Name
LOGAN ENGINEERING AND CONTRACTING COMPANY



Principal Place of Business Mailing Address
COMPANY COMPANY
5731 ST.AUGUSTINE RD. 5731 ST.AUGUSTINE RD.
JACKSONVILLE FL 32207 JACKSONVILLE FL 32207

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		25 Suite, Apt. #, etc.		12/13/1961	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-0968850	
24 Country		30 Country		Applied For	
				Not Applicable	
				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				10. Name and Address of New Registered Agent			
LOGAN, CAMPBELL F 1127 BROOKWOOD RD JACKSONVILLE FL 32207				81 Name LOGAN, VERYL E.			
				82 Street Address (P.O. Box Number is Not Acceptable) 1127 BROOKWOOD ROAD			
				83			
				84 City JACKSONVILLE FL 85 Zip Code 32207			

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 VERYL E. LOGAN 1-27-98
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PDT	<input checked="" type="checkbox"/> DELETE		1.1 TITLE	PTD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LOGAN, CAMPBELL F			1.2 NAME	LOGAN, VERYL E.		
STREET ADDRESS	1127 BROOKWOOD RD			1.3 STREET ADDRESS	1127 BROOKWOOD ROAD		
CITY-ST-ZIP	JAX, FL 00000			1.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207		
TITLE	VD	<input checked="" type="checkbox"/> DELETE		2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LOGAN, JOSEPH E			2.2 NAME			
STREET ADDRESS	4952 PRINCE EDWARD DR.			2.3 STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL			2.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 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)(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: VERYL E. LOGAN Jan 27-1998
Signature, typed or printed name of signing officer or director

CR2E034 (10/97)