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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 280287

(4)

ROGERS ENGINEERING & CONSTRUCTION CO.

Principal Plac	ce of Business	Malling Address							
1715 S DIVISION AVENUE P O BOX 568633, ORLANDO, FL 32856 ORLANDO FL 32805 US		P.O. BOX 568633 P O BOX 568633, ORLANDO, FL 32656 ORLANDO FL 32856-8633 US							
					3. Date Incorporated or Qualified 04/08/1964 04/26/1996				
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number		Ar	oplied For
21		26			59-1051394			ot Applicable	
Suite, Apt	#, erc	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 / Fee Re		
Cily & Stat	te	City & State				6. Election Campaign Financing		\$5.00	
23		28			Trust Fund Contribution		Added (
Ζφ	Country	Zηρ	Co	untry		8. This corporation has riability fo	rintangible	e tax under s	. 199.032,
4	25	29	30				Yes		
	9. Name and Address of Curr	ent Registered Agent				10. Name and Address of New F	egistered	Agent	
ROG	BERS JR,RICHARD B.			81	Name	•			
4 2828	8 MONTMART DRIVE			82	Street Add	dress (P.O. Box Number is Not Accepta	ble)		·····
ORL	ANDO FL 32812								······································
				83			٠.		
				84	City		FL	85 Zip	Code
44 Direction	to the previsions of Spotions 607.0	602 and 607 1608 Florida St	abiter the	bow	named co	rooration cultimite this statement for the	DUIDOSE (of changing I	te renictared
office or i agent. La	registered agent, or both, in the Sta am familiar with, and accept the obl	ite of Florida. Such change w igations of, Section 607.0505	as authorize i, Ftorida Sta	ed by	the corpora	rporation submits this statement for the ation's board of directors. I hereby acci	pt the ap	pointment as	registered
SIGNATURE	Signarive injurition printed name of registered	agent and title if applicable.	(NOTE Register	ed Age	ini signature requ	uired when reinstating)	DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	ICERS AN	D DIRECTOF	RS IN 12
TITLE	PD	☐ DELETE	1.17	ITLE				Change	Addition
NAME	ROGERS JR,R B		1.21	IAME					
STREET ADDRESS	2828 MONTMART DRIVE		135	STREET	ADDRESS				
CHTY-SI-ZiP	ORLANDO FL		1.4 (CITY-S	T-ZIP				
THE	ST	DELETE	2.11	TITLE				Change	Addition
NAME	ROGERS, ALLISON S.		2.21	AME					
STREET ADORESS	2828 MONTMART DR.		2.3 9	STREET	ADDRESS	•			
CHY-ST-ZIP	ORLANDO FL				ST-ZIP			T-1 -	TT
THTLE		DELETE	1	TITLE				Change	Addition
NAME				NAME					
STREET ADDRESS					ADDRESS				
CITY - S1 - 7IP		Distant			ST- 2 IP	· · · · · · · · · · · · · · · · · · ·		Channe	Addition
TITLE		☐ DELETE	1	ITLE		•		Change	Addition
NAME				NAME		·			
STREET AUDRESS					ADORESS				•
CITY-ST-7P		DELETE		CITY-S	37-2IP			Change	Addition
TITLE		רו הגונוני		INTLE	'			change	FTT MOGROUN
NAME			1	NAME					
STREET LADORESS	1		1		ADDRESS				
CITY - ST - ZIP		DELETE		CITY - S	ST - ZIP			☐ Change	Addition
TITLE				TITLE				rm oneutic	LI AUGINON
NAME				NAME		•			
STREET ADDRESS	1		6.3	STREET	ADDRESS				

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 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 of changed, or on an attachment with an address.

ALLISON S. ROGERS, SECRETARY—TREASURER

SIGNATURE:

SIGNATURE:

4/25/97

4/25/97

4/25/97

FILED

May 02 1997 8:00am

Secretary of State