SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

JEROME B. BROWDER CONTRACTOR, INC. Principal Place of Business Mailing Address 407 BAYSHORE DR P O BOX 12485 PENSACOLA FL 32507 PENSACOLA FL 32507									
FENSAUULA	N FL 3230/	PENSACOLA	PENSACOLA FL 32507			Date Incorporated or Qualified			
2. Principal	Place of Business	2a. Mailing A	ddress			01/31/1972 4. FEI Number	06	728/199	
21		26				59-1377540		<u> </u>	Applied For Not Applicab
Suite, Apt	t. #, etc.	Suite, Ap	t #, etc			5. Cert ficate of Status Desir	eo 🗆		5 Additional
City & Sta	nte	27 City & Sta	ato.				<u> </u>		Required
23		28				6. Election Campaign Finance Trust Fund Contribution	cing		00 May Be ed to Fees
Zip	Country	Zip		Countr	у	8. This corporation has liabit	ity for intannible		
24	25 9. Name and Address of Curr	29		30		Florida Statutes	Yəs	No	
Dr		ent negisteren Age		81	Name	10. Name and Address of N	ew Registered	Agent	
	ROWDER, JEROME B 17 BAYSHORE				1			7727.164	
	ENSACOLA FL 32507			82	Street Add	dress (P.O. Box Number is Not Acc	eptable)		
				83					
				84	City			85 Zr	p Code
11. Pursuant	to the provisions of Sections 607.05	502 and 607 1509 Ex	orida Statute	on the obser			FL		
office or agent 1 a	to the provisions of Sections 607.06 registered agent, or both, in the Stat am familiar with, and accept the obli	to of Florida, Such chi gations of, Section 6	ange was a 07.0505, Flo	ulhorized by	the corporat	ion's board of directors. I hereby a	the purpose of iccept the appo	changing i intment as	its registered registered
SIGNATURE						•			
SAGRATOTIE	Plant								
12.	Signature: typed or providinance of registered a OFFICERS A			f. Filigistered Age		ied when reassating)	DATE		· ·
		gent and the Lappicable		f. Bi-gistered Age			DATE	DIRECTO	
12.	OFFICERS A SP BROWDER, JEROME B		(NO)	f. Filigistered Age		ied when reassating)	DATE		
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SIGNATURE:

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 that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

GNATURE:

SIGNATURE AND TYPED OR PRINTED HAVE OR SIGNED OF FIGHR OR BIRECTOR.

Laybre Figure 3.