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PROFIT CORPORATION ANNUAL REPORT



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

1006

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W.J. (NEWMAN JR. CONTRACTIN	IG, INC.			 			all digit blait had
rincipal Place	e of Business	Mailing Address						
HICKORY T P.O. BOX 6 ST. CLOUD	885	HICKORY TREE ROA P.O. BOX 685 \$T. CLOUD FL 32770						
			•		Date Incorporated or Qualified 09/05/1972		e of Last F	
Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		03/22/1	Applied For
Suite, Apt.	# etc	Cuito Ant 41 at-			59-1425204			Not Applicable
outo, Apt.	π ₁ σιο.	Suite, Apt. #, etc.			5. Certificate of Status Desired	Xi .		5 Additional Required
City & State	9	City & State			6. Election Campaign Financing			00 May Be
7in		28			Trust Fund Contribution		Adde	ed to Fees
Zip	Country 25	Zip (29)	Gountry 30	У	8. This corporation has liability for in	intangible ta	x under s	199.032,
	9. Name and Address of Curren		1301		10. Name and Address of New R		Agent	·
			81	1 Name			<u> </u>	
	AN, THRECA		82	2 Street Add	lress (P.O. Box Number is Not Acceptab	ile)		
2475 HICKORY TREE RD ST. CLOUD FL 32770				3				
	UUU FL 32//U		**	1				
O1. QE			<u> </u>	.				
Pursuant t	o the provisions of Sections 607.0502 ed agent, or both, in the State of Floric th, and accept the obligations of, Secti	and 607.1508, Florida Statute da. Such change was authorizi on 607.0505, Florida Statutes	es, the above- ed by the corp	<u> </u>	ration submits this statement for the pur, and of directors. I hereby accept the appo	FL pose of cha pintment as		ip Code registered offic d agent. I am
Pursuant to or register familiar with GNATURE	th, and accept the obligations of, Secti Signature, typed or printed name of registered agent	on 607.0505, Florida Statutes	es, the above- ed by the corp	<u> </u>	ind or directors. Thereby accept the appo	pose of cha pintment as		
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SIGNATURE:

3/14/96 407-892-2382