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Apr 23 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 427107 (8)

1. Corporation Name
CULLISON-WRIGHT CONSTRUCTION CORP

Principal Place of Business

112 N E 12TH ST
PO BOX 2496
OCALA FL 34478

Mailing Address

112 N E 12TH ST
PO BOX 2496
OCALA FL 34478-2496



3. Date Incorporated or Qualified
03/01/1973

3a. Date of Last Report
06/04/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

4. FEI Number

59-1441025

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

CULLISON, JERRY B.
112 NE 12TH ST.
OCALA FL 32670

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME CULLISON, JERRY
STREET ADDRESS 1403 S.E. FT. KING
CITY- ST- ZIP Ocala FL

DELETE

TITLE TD
NAME CULLISON, VIRGINIA
STREET ADDRESS 1403 S.E. FT. KING
CITY- ST- ZIP Ocala FL

DELETE

TITLE VPD
NAME MANSFIELD, SANDRA CULLIS
STREET ADDRESS 2875 S.E. 34TH STREET
CITY- ST- ZIP Ocala FL

DELETE

TITLE SD
NAME COBB, LORA
STREET ADDRESS RT. 4B OX 731G
CITY- ST- ZIP SILVER SPGS. FL

DELETE

TITLE VD
NAME CULLISON, SARA
STREET ADDRESS 1043 SE FT KING
CITY- ST- ZIP Ocala FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VPD
1.2 NAME MANSFIELD, BARRY
1.3 STREET ADDRESS 2875 SE 34TH STREET
1.4 CITY- ST- ZIP Ocala, FL

Change Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

Change Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

Change Addition

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 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: *Jerry B Cullison* *Jerry B Cullison* 4-18-97 352-629-9574

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)