


1-23-98 B-0658 C
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jan 23 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 # 438084 (6) 1. Corporation Name MARK C. ARNOLD CONSTRUCTION COMPANY		



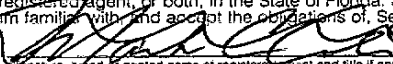
Principal Place of Business PO BOX 161230 ALTAMONTE SPRINGS FL 32716 US	Mailing Address PO BOX 161230 ALTAMONTE SPRINGS FL 32716 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 714 LAKEWORTH CIRCLE Suite, Apt. #, etc. 22 City & State 23 HEATHROW FL Zip Country 24 32746 25 US		2a. Mailing Address 26 PO Box 683299 Suite, Apt. #, etc. 27 City & State 28 PARK CITY UT Zip Country 29 84068 30 US		3. Date Incorporated or Qualified 10/15/1973	
				4. FEI Number 59-1489719 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 type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent ARNOLD, MARK C 2143 S. TERRACE BLVD. LONGWOOD FL 32779				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 714 LAKEWORTH CIRCLE 83 84 City HEATHROW FL 85 Zip Code 32746			
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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  DATE 1/16/98
(NOTE: Registered Agent signature required when reinstating.)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	ARNOLD, MARK C.			1.2 NAME			
STREET ADDRESS	2143 S. TERRACE BLVD.			1.3 STREET ADDRESS	714 LAKEWORTH CIRCLE		
CITY - ST - ZIP	LONGWOOD FL			1.4 CITY - ST - ZIP	HEATHROW FL 32746		
TITLE	S	<input type="checkbox"/> DELETE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	ARNOLD, KATHLEEN B.			2.2 NAME			
STREET ADDRESS	2143 S. TERRACE BLVD.			2.3 STREET ADDRESS	714 LAKEWORTH CIRCLE		
CITY - ST - ZIP	LONGWOOD FL			2.4 CITY - ST - ZIP	HEATHROW FL 32746		
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:  DATE 1/16/98

CR2E034 (10/97)