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PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # 467610

1. Corporation Name

GIBRALTAR CONSTRUCTORS, INC.

Principal Place of Business

915 Pine Tree Terrace
DeLand, FL 32724

Mailing Address

3. Date Incorporated or Qualified: 1-16-75

3a. Date of Last Report: 3/24/95

4. FEI Number: 59-1624179 (Applied For / Not Applicable)

2. Principal Place of Business
21: 915 PineTree Terrace
22: Suite, Apt. #, etc.
23: City & State: DeLand, FL
24: Zip: 32724
25: Country: US

2a. Mailing Address
26: 915 PineTree Terrace
27: Suite, Apt. #, etc.
28: City & State: DeLand, FL
29: Zip: 32724
30: Country: US

5. Certificate of Status Desired: [X] **$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

James L. Fly, Jr.
915 PineTree Terrace
DeLand, FL 32724

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: _____ DATE: _____
Signature, typed or printed name of registered agent and date (IN THE Registered Agent's own handwriting when resigning)

12. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD James L. Fly, Jr. 915 PineTree Terrace DeLand, FL 32724	[ ] DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Jasper R. Carroll 808 N. Beach Street Daytona Beach, FL 32114	[ ] DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Lynn McCarthy Hawkins 915 PineTree Terrace DeLand, FL 32724	[ ] DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1-1 TITLE / 1-2 NAME / 1-3 STREET ADDRESS / 1-4 CITY-ST-ZIP		[ ] 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	900001828069 -05/20/96--01015--018 ***279.25	[ ] 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

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Lynn M. Hawkins — 4-30-96 — 904-252-7653
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — Daytime Phone #