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Feb 11 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 # 481997 (5)

1. Corporation Name
GATOR ENGINEERED CONSTRUCTION, INC.



Principal Place of Business

Mailing Address

1521 LISA DR
P O BOX 1778
WAUCHULA FL 33873
US

P O BOX 1778
P O BOX 1778
WAUCHULA FL 33873-1778
US

3. Date incorporated or Qualified
07/28/1975

3a. Date of Last Report
02/12/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number

59-1617084

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

10. Name and Address of New Registered Agent

BROWN, ROY A
1521 LISA DR
P O BOX 1778
WAUCHULA FL 33873

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP
NAME BROWN, ROY A
STREET ADDRESS RT-0 BOX 20 1/2 HANCHEY
CITY-ST-ZIP WAUCHULA FL

1.1 TITLE DP
1.2 NAME Brown, Roy A
1.3 STREET ADDRESS 1521 LISA DR.
1.4 CITY-ST-ZIP P.O BOX 1778 WAUCHULA FL 33873

TITLE DS
NAME BROWN, SANDRA K
STREET ADDRESS RT-0 BOX 20 1/2 HANCHEY
CITY-ST-ZIP WAUCHULA FL

2.1 TITLE DS
2.2 NAME Brown, Sandra K
2.3 STREET ADDRESS 827 Hanchey Rd
2.4 CITY-ST-ZIP Wauchula FL 33873

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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:

Signature and typed or printed name of signing officer or director

1-20-97

941-773-6616

Date

Daytime Phone #

CR2E034 (9/96)