FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



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

1996

DOCUM	MENT # 52637	0 (2)		
TAYLOR PAVING, INC.				
Principal Place o	of Business	Mailing Address		(400/8) DVICE (1918 BYINE EININ 1064) SEUN BYBN BYBN BYBN BYBN BYBN BYBN BYBN BY
5800 TAYLOR ROAD NAPLES FL 33942		5800 TAYLOR ROAD NAPLES FL 33942		
				3. Date Incorporated or Qualified 3a. Date of Last Report 02/22/1977 02/20/1995
2. Principal Plac	ce of Business	2a. Mailing Address		4. FEI Number Applied For 59-1736652 Not Applicable
Suite, Apl. #,	etc	Suite, Apt. #, etc.		\$8.75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No
24	25 9. Name and Address of Curre	29 and Agent	30	10. Name and Address of New Registered Agent
	9. Name and Address of Cure	it trogratored Agent	81 Name	
TAYLOR, ROBERT V 1961 KRAPE RD. NAPLES, FL. FL 33964		82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
			83	
NAFLEO	, FL. FL 33504		84 City	■■ 85 Zip Code
			1 1 1	poration submits this statement for the purpose of changing its registered office
or registere familiar with	ed agent, or both, in the State of Flor n, and accept the obligations of, Sec Signature, typed or printed name of registered age	ida. Such change was authorize ition 607,0505, Florida Statutes.	E Registered Agent signature requ	pulsed when reinstalting) DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
1 TITLE	DP DOPERT V	DELETE	1. 1 BillE	
NAME	Taylor, robert v 1961 Krape Rd.		1.2 NAME 1.3 STREET ADDRESS	
STREET ADDRESS CITY-S1-ZIP	NAPLES, FL 00000		1.4 CITY-ST-ZIP	
TITLE	VD	☐ DELETE	2. 1 TITLE	Change Addition
NAME	TAYLOR, JUNE S		2.2 NAME	
STREET ADDRESS	1224 FRANK WHITEMAN B	LVD.	2.3 STREET ADDRESS	
CITY+ST-7IP	NAPLES, FL 00000	Pri ot tre	2.4 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE		DELETE	3. 1 TITLE	Change C Monton
NAME			3 2 NAME ! 33 STREET ADDRESS	
STREET ADDRESS			3.4 CITY-ST-ZIP	
CITY-ST-ZIP TITLE		DELETE	4. 1 TITLE	Change Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-S1-ZIP			4.4 CITY - ST - ZIP	
TITLE		DELETE	5. 1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5 3 STREET ADDRESS	
CITY-S1-ZIP		□ DE+ETE	5.4 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE		☐ DELETE	6. 1 TITLE	- Complete - Industry
NAME			6.2 NAME 6.3 STREET ADDRESS	
STREET ADDRESS			6.4 CITY-ST-ZIP	
CITY - ST - ZIP			0.5 011 - 31-411	Control of

14. I do hereby certify that the information supplied with this filing is voluntarily turnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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 certify 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:

Robert V. Taylor

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Robert V. Taylor 4-23-96 94/-597-6522