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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

1. Corporation Name

555192 **DOCUMENT #**

(4)

FLORIDA TRUSS AND FABRICATORS, INC.									
Principal Place of	of Business	Mailing Address				# 144161 #1141 #1141 #1561 1141# 1841#		12 MIMIL MEDEL DIDIL MIDEL LAMI	
4330 45TH ST P.O. BOX 608	8	4330 45TH ST P.O. BOX 6088							
VERO BEACH FL 32967-1181		VEHO BEACH FE 329	VERO BEACH FL 32967-1181		3. Date incorporated or Qualified 12/12/1977	1	of Last Report 5/01/1995		
		2a. Mailing Address 26	າ ້			4. FEI Number 59-1792289	' '		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	1			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State		City & State	- ₁ ·			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip	Country	Zip	30 Co	untry		This corporation has liability for i Florida Statutes Yes	ntangible ta	x under s 199.032,	
24	[25] 9. Name and Address of Curre	29	30	т		10. Name and Address of New R		Agent	
	g. Name and Address of Curre	ili negisiereu Agent		81	Name	10. 110110 0110 1101100	3.5.0.0.0		
MILLS, RICHARD C.				82		ress (P.O. Box Number is Not Acceptable)			
6775-49TH STREET VERO BEACH FL 32960				83					
12:10 01				84	City		FL	85 Zip Code	
or registere familiar with SIGNATURE	od agent, or both, in the State of Flor n, and accept the obligations of, Sec Signature, byted or printed name of registered agen	rida. Such change was authori ation 607.0505, Florida Stalute	zed by the s.	corp	oration's bo	ioration submits this statement for the pur pard of directors. I hereby accept the appr ured when rehalating	DATE DATE	registered agent. Fam	
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFF			
TITLE	P	DELETE	1.1	1.1 TITLE			[Change C Addition	
NAME	MILLS, RICHARD C		1.2	NAME					
STREET ADDRESS	6775 49TH STREET		1.3 STREET ADDRESS		ADDRESS				
CITY-ST-ZIP	VERO BEACH, FL 00000		1.4	1.4 CITY - ST - ZIP					
TITLE	ST	· ·		2. 1 TITLE			[Change	
NAME	MILLS, JOYCE J			2 2 NAMÉ					
STREET ADDRESS	6775 49TH STREET		23	2.3 STREET ADDRESS					
CITY-ST-ZIP	VERO BEACH, FL 00000	VERO BEACH, FL 00000		2 4 CrTY-ST-7iP				Character CT Addition	
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NAME				NAME					
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NAME			4.2 NAME					ì	
STREET ADDRESS					I ADDRESS				
CITY-ST-ZIP		[] DELETE	4.4 CiTY 5.1 Till		S1-Zil'			Change Addition	
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NAME					1 ADDRESS				
STREET ADDRESS									
CITY-ST-ZIP	DELETE			5 4 CITY - ST - ZIP 6 1 TITLE				Change Addition	
TITLE		□ Meet		NAMÉ			'		
NAME					1 ADDRESS				
STREET ADDRESS	1		6.5	oinct	COSTICION 1				

64 CITY-ST-ZIP

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)(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 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. appears in Block 12

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-96 (401) 567-1593 Date Date Dayline Phone R

CR2E034 (12/95)