

FILED

Feb 16 1998 8:00am
Secretary of State



DOCUMENT # 562053
1. Corporation Name **W.A. NEUMANN CONSTRUCTION, INC.**

(9)

Principal Place of Business	Mailing Address
5720 GALL BLVD SUITE 3 ZEPHYRHILLS FL 33540 US	P.O. BOX 596 ZEPHYRHILLS FL 33539 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21	36707 LAUREL OAK LN	26	
	Suite, Apt. #, etc.		Suite, Apt. #, etc.
22		27	
	City & State		City & State
23	DADE CITY, FL	28	
	Zip		Zip
24	33525		Country
	Country	29	
25	PASCO	30	

3. Date Incorporated or Qualified		03/15/1978	
4. FEI Number	59-1819167	Applied For	Not Applicable
5. Certificate of Status Desired	<input checked="" 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 checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent	
GIBBS, A.P. 37911 HEATHER PLACE DADE CITY FL 33525	81 Name
	82 Street Address
	83
	84 City

10. Name and Address of New Registered Agent

ss (P.O. Box Number is Not Acceptable)

FL 85 Zip Code

11. Pursuant to the provisions of Sections 609.0302 and 609.1508, 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 609.0505, Florida Statutes.

SIGNATURE

* Indicate type (or printed name) of topology (if any) and size (if applicable).

(NOTE: Registered Agent signature required when reinstalling)

DATE _____

12.		OFFICERS AND DIRECTORS
TITLE	PD	<input type="checkbox"/> DELETE
NAME	NEUMANN, WARREN A J	
STREET ADDRESS	36707 LAUREL OAK LANE	
CITY - ST - ZIP	DADE CITY FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input checked="" type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
1.2 NAME	JASON W. NEUMANN	
1.3 STREET ADDRESS	36707 LAUREL OAK LN	
1.4 CITY - ST - ZIP	DADE CITY, FL 33525	
2.1 TITLE	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
2.2 NAME	TERESA K. NEUMANN	
2.3 STREET ADDRESS	36707 LAUREL OAK LN	
2.4 CITY - ST - ZIP	DADE CITY, FL 33525	
3.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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 of the report or on an attachment with an address.

SIGNATURE: Teresa K. Neumann - TERESA K. NEUMANN 1-31-98 813/782-9080

CR2E034 (10/97)