FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 632942

(9)

Mailing Address

M & T CONSTRUCTION CO., INC.

FILED Apr 11 1997 8:00am Secretary of State



| SUITE 1 FT WALTON B | EACH FL 32547-1689 | SUITE 1 FT WALTON | BEACH FL 32 | 547-1669 | | 3. Date Incorporated or Qualified | Se Do | te of Last F | Bood |
|------------------------|----------------------------------------------|---------------------------|----------------|-----------------|--------------------|---------------------------------------------------------|-----------------|---------------|------------------------|
| | | | | | | 08/16/1979 | 1 - | 2/1996 | тероп |
| | lace of Bus ness | 2a. Mading A | \ddress | | | 4. FEI Number | | | pplied For |
| 21 | | 26 | | | | 59-1935289 | | | lot Applicable |
| Suite, Apt. 22 | | Suite, Ap | | | | 5. Certificate of Status Desired | | Fee R | Additional Required |
| City & State | 0 | City & St. | ate | | | Election Campaign Financing Trust Fund Contribution | | | May Be I to Fees |
| Zφ | Country | Zip | | Country | ! | 8. This corporation has liability for in | ntangible t | ax under: | s. 199.032, |
| 24 | 25 | 29 | | 30 | ****** | | Yes 🗀 | | |
| | 9. Name and Address of Cu | rrent Registered Age | ent | | T 17 | 10. Name and Address of New Reg | jistered A | gent | |
| | ING, T. L. | | | 81 | Name | | | | |
| | SHADY LANE | | | 82 | Street Add | dress (P.O. Box Number is Not Acceptab | le) | | |
| MAR | RY ESTHER FL 32569 | | | 83 | | | | | |
| | | | | 03 | | | | | |
| | | | | 84 | City | | P** 1 | 85 Zip | Code |
| | | 0000 1007 1000 F | | | | poration submits this statement for the p | <u>FL</u> | | |
| agert La SIGMATURE | m familiar with, and accept the o | obligations of, Section (| 607.0505, Flo | orida Statute | \$. | ation's board of directors. I hereby accep | | anurieni as | s registered |
| | So and by record and mort register | | (NOTE | : Registered Ag | ant signature requ | uired where reinstating) ADDITIONS/CHANGES TO OFFICE | DATE COC AND | DIRECTO | DC IN 12 |
| 12. | PD | S AND DIRECTORS | DELETE | 13. 11 TITLE | | ADDITIONS/CHAINGES TO OFFIC | | Change | |
| | YOUNG, T. L. | L | " PETELE | 1.2 NAME | | | | Origingo | |
| NAME STREET ADDRESS | 17 SHADY LANE | | | 1.3 STREET | ADDRESS | | | | |
| | MARY ESTHER FL | | | 1.4 CiTY-5 | | | | | |
| OHY ST Z = 1 | SDV | | DELETE | 2 1 TITLE | 51-217 | | | Change | Addition |
| NAME | YOUNG, MILLIE H. | _ | 3 | 2.2 NAME | | | • | | |
| STREET ADDRESS | 17 SHADY LANE | | | 2.3 STREE | ADDRESS. | | | | |
| COTY - ST. ZIF: | MARY ESTHER FL | | | 2. 4 CITY - | | | | | |
| 10td | | | DELETE | 3.1 TITLE | 31 611 | | | Change | Addition |
| NAME | | | | 3.2 NAME | Ì | | | | |
| STREET ADDRESS | | | | 3.3 STREE | ADDRESS | | | | |
| City-St ZiP | | | | 3.4. CITY - | ST-ZiP | | | | |
| TVILE | | | DELETE | 4.1 TITLE | | | 1 | Change | Addition |
| MAME | | | | 4. 2 NAME | Ì | | | | |
| STREET ADDRESS | | | | 4.3 STREE | ADDRESS | | | | |
| C TY - S1 - 7iP | | | | 4.4 CiTY- | ST-71P | | | | |
| 10'11 | | | DELETE | 5.1 TITLE | | | | Change | Addition |
| NºM: | | | | 5.2 NAME | | | | | |
| STREET ADJUGISS | | | | 5.3 STREE | ADDRESS | | | | |
| COY-ST ZIP | | | | 5.4 CITY- | ST - Z IP | | | | |
| TUEF | | | DELETE | 6.1 TITLE | | | | Change | Addition |
| NAMs | | | | 6.2 NAME | | | | | |
| STREET ADDRESS | | | | 6.3 STREE | ADDRESS | | | | |
| City-St ZiP | | | | 6.4 CITY- | | | | | |
| 44 1 als based | to a court to the state of indicators of the | nal ad with this flux d | 0.00 0.00 0.00 | | | nd in Castina 119.07(3)(i) Florida Statuto | . I further | portify the | u tho |

4. I do hereby cert by that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), Florida Statutes. I further certify that the information indicated on this agricult report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 TYPES OR PRINTECHNATES OF SIGNING OFFICER

4-7-97

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