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95 MAY -1 AM 8:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **819207** (2)
1. Corporation Name
HOLLAND CONSTRUCTION CO., INC.

Principal Place of Business Mailing Address
**340 WEDDINGTON - MARVIN RD.
WEDDINGTON NC 28173** **340 WEDDINGTON - MARVIN RD.
WEDDINGTON NC 28173**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/07/1965	3a. Date of Last Report 04/05/1994
21. State Apt # etc	22. City & State	26. State Apt # etc	27. City & State	4. FCI Number 75-1090037	Applied For <input type="checkbox"/> Not Applicable
24. Zip	25. Country	29. Zip	30. Country	5. Certificate of Status Debit <input type="checkbox"/>	\$8.75 Additional Fee Required
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

**ABERNETHY, BRUCE R. JR.
900 VIRGINIA AVE.
SUITE G
FT. PIERCE FL 34950**

81. Name	82. Street Address (P.O. Box Number is Not Acceptable)	83.	84. City	85. Zip Code
			FL	

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 607.0506, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME PD HOLLAND, R CALVIN	12.2 STREET ADDRESS 340 WEDDINGTON-MARVIN RD WEDDINGTON NC	13.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.3 CITY, ST, ZIP		13.2 NAME	
12.4 NAME VD HOLLAND, R. STANLEY	12.5 STREET ADDRESS 340 WEDDINGTON-MARVIN RD WEDDINGTON NC	13.3 STREET ADDRESS	
12.6 STREET ADDRESS		13.4 CITY, ST, ZIP	
12.7 CITY, ST, ZIP		13.5 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.8 NAME SD HOLLAND, BETTY M	12.9 STREET ADDRESS 340 WEDDINGTON-MARVIN RD WEDDINGTON NC	13.6 NAME	
12.10 STREET ADDRESS		13.7 STREET ADDRESS	
12.11 CITY, ST, ZIP		13.8 CITY, ST, ZIP	
12.12 NAME VD HOLLAND, K. TODD	12.13 STREET ADDRESS 340 WEDDINGTON-MARVIN RD WEDDINGTON NC	13.9 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.14 STREET ADDRESS		13.10 NAME	
12.15 CITY, ST, ZIP		13.11 STREET ADDRESS	
12.16 NAME VD MOORMAN, DEBRA H.	12.17 STREET ADDRESS 5905 CANEWOOD PLACE RALEIGH NC	13.12 CITY, ST, ZIP	
12.18 STREET ADDRESS		13.13 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.19 CITY, ST, ZIP		13.14 NAME	
		13.15 STREET ADDRESS	
		13.16 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and that I am qualified for the assignment stated in Article 13 of the Florida Statutes. I further certify that the information included on this annual report is true and correct and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation for the purpose of this report as required by Chapter 187, Florida Statutes, and that my name appears in Block 12 of this report.

SIGNATURE: *R. Calvin Holland* **R. CALVIN HOLLAND**
05-01-95 704-846-1029
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR