

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **823733** (1)

1. Corporation Name
MCCRORY CONSTRUCTION COMPANY, INC.



Principal Place of Business: **1280 ASSEMBLE ST. P.O. BOX 145 COLUMBIA SOUTH CAROLINA 29202**
 Mailing Address: **1280 ASSEMBLE ST. P.O. BOX 145 COLUMBIA SOUTH CAROLINA 29202**

2. Principal Place of Business	2a. Mailing Address
21 State, Apt #, etc.	26 State, Apt #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified 11/25/1969	3a. Date of Last Report 03/30/1995
4. FEI Number 57-0404547	Applied For Not Applicable
5. Certificate of Status Desired <input 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 has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10. Name and Address of New Registered Agent	

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION FL 33324**

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

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0504, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Print Name and Title)

Signature of New Agent (Print Name and Title)

Date

12. OFFICERS AND DIRECTORS		<input type="checkbox"/> DELETE	
TITLE	ATC		
NAME	ROSEBROCK, DEL		
STREET ADDRESS	58 OLD STILL RD.		
CITY - ST - ZIP	COLUMBIA, SC 00000		
TITLE	V		
NAME	RICHARDS, CLARENCE		
STREET ADDRESS	9724 WYLE ROAD		
CITY - ST - ZIP	HOPKINS, SC 00000		
TITLE	P		
NAME	THARP, JAMES		
STREET ADDRESS	1280 ASSEMBLY ST.		
CITY - ST - ZIP	COLUMBIA SC		
TITLE	D		
NAME	BYARS, JACK C		
STREET ADDRESS	1132 BAYWATER DR		
CITY - ST - ZIP	W COLUMBIA SC		
TITLE	D		
NAME	BROWN, FRANK T		
STREET ADDRESS	RT 1 BOX 340 NA		
CITY - ST - ZIP	PROSPERITY SC		
TITLE	D		
NAME	COUSSON, KENNETH J		
STREET ADDRESS	107 BOULDER TOP CT		
CITY - ST - ZIP	W COLUMBIA SC		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
1. TITLE			
2. NAME			
3. STREET ADDRESS			
4. CITY - ST - ZIP			
5. TITLE			
6. NAME			
7. STREET ADDRESS			
8. CITY - ST - ZIP			
9. TITLE			
10. NAME			
11. STREET ADDRESS			
12. CITY - ST - ZIP			
13. TITLE			
14. NAME			
15. STREET ADDRESS			
16. CITY - ST - ZIP			
17. TITLE			
18. NAME			
19. STREET ADDRESS			
20. 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 reviewer or compiler 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 in an attachment with an address.

SIGNATURE: *Del A. Rosebrock* Del A. Rosebrock 3/12/96 803-799-8100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)