FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **824511** **(0)**

1. Corporation Name

AZZARELLI CONSTRUCTION CO. OF ILLINOIS

Principal Place of Business

RT. 17 WEST
P.O. BOX 767
KANKAKEE ILLINOIS 60901

Mailing Address

RT. 17 WEST
P.O. BOX 767
KANKAKEE ILLINOIS 60901

3. Date Incorporated or Qualified: **05/08/1970**

3a. Date of Last Report: **01/24/1995**

4. FEI Number: **36-2118275** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has Liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business
21
22 Suite, Apt. #, etc.
23 City & State
24 Zip 25 Country

2a. Mailing Address
26
27 Suite, Apt. #, etc.
28 City & State
29 Zip 30 Country

9. Name and Address of Current Registered Agent

AZZARELLI, BARTLE
7810 RIVER SHORE DRIVE
TAMPA FL 33604

10. Name and Address of New Registered Agent

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

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 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

01 Title	D	☐ DELETE
02 Name	AZZARELLI, J I	
03 Street Address	14 MARQUETTE LANE	
04 City, St, Zip	KANKAKEE, IL 00000	
11 Title	D	☐ DELETE
12 Name	AZZARELLI, SAM J.	
13 Street Address	R.R. #6 BOX 214	
14 City, St, Zip	KANKAKEE IL	
21 Title	PD	☐ DELETE
22 Name	AZZARELLI, JOHN F..	
23 Street Address	2633 W RTE 113	
24 City, St, Zip	KANKAKEE IL	
31 Title	D	☐ DELETE
32 Name	AZZARELLI, BARTLE	
33 Street Address	7810 RIVER SHORE DR	
34 City, St, Zip	TAMPA, FL 00000	
41 Title	STD	☐ DELETE
42 Name	HINTON, LARRY A.	
43 Street Address	2473 POTTERS TURN	
44 City, St, Zip	KANKAKEE IL	
51 Title		☐ DELETE
52 Name		
53 Street Address		
54 City, St, Zip		
61 Title		☐ DELETE
62 Name		
63 Street Address		
64 City, St, Zip		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

01 Title		☐ Change ☐ Addition
02 Name		
03 Street Address		
04 City, St, Zip		
11 Title		☐ Change ☐ Addition
12 Name		
13 Street Address		
14 City, St, Zip		
21 Title		☐ Change ☐ Addition
22 Name		
23 Street Address		
24 City, St, Zip		
31 Title		☐ Change ☐ Addition
32 Name		
33 Street Address		
34 City, St, Zip		
41 Title		☐ Change ☐ Addition
42 Name		
43 Street Address		
44 City, St, Zip		
51 Title		☐ Change ☐ Addition
52 Name		
53 Street Address		
54 City, St, Zip		
61 Title		☐ Change ☐ Addition
62 Name		
63 Street Address		
64 City, St, Zip		

CR2E034 (12/95)

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)(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 if changed, or added, above.

SIGNATURE: Larry A. Hinton 1-18-96 815-937-8700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Secretary