

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 # 829961 (2)

1. Corporation Name

FLOURNOY CONSTRUCTION COMPANY



Principal Place of Business

Mailing Address

**900 BROOKSTONE CENTRE PARKWAY
P O BOX 6566
COLUMBUS GA 31904**

**900 BROOKSTONE CENTRE PARKWAY
P O BOX 6566
COLUMBUS GA 31904**

3. Date Incorporated or Qualified

04/23/1973

3a. Date of Last Report

02/22/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

58-1133017

Applied For

Not Applicable

22

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

23

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

24

Zip

Country

29

Zip

Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CORPORATION INFORMATION SERVICES, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301**

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

Signature typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when re-designating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **DC
FLOURNOY, JOHN F**
STREET ADDRESS **6500 STANDING BAY RD**
CITY- ST- ZIP **COLUMBUS GA**

TITLE ☐ DELETE

NAME **ST
MOORE, GEORGE S.**
STREET ADDRESS **1553 MILLINGTON RD.**
CITY- ST- ZIP **COLUMBUS GA**

TITLE ☐ DELETE

NAME **D
RANDALL, JONES W**
STREET ADDRESS **2714 LYNDA LANE**
CITY- ST- ZIP **COLUMBUS GA**

TITLE ☐ DELETE

NAME **P
OSBORNE, RANDY**
STREET ADDRESS **RT. 2, BOX 627-C**
CITY- ST- ZIP **SMITHS AL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 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:

George S. Moore, Secretary/Treasurer

2/21/96

(706) 324-4000

Date

Daytime Phone

CR2E034 (12/95)