

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 05, 1999 8:00 am
Secretary of State

05-05-1999 90151 001 ***158.75

DOCUMENT # 832670

1. Corporation Name

METRIC CONSTRUCTORS, INC.

Principal Place of Business

6060 J. A. JONES DRIVE
ATTN: TAX DEPT.
CHARLOTTE NC 28287
US

Mailing Address

6060 J. A. JONES DRIVE
ATTN: TAX DEPT.
CHARLOTTE NC 28287
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/09/1974

4. FEI Number

56-0931334

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☒

Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

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

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VD ☒ DELETE

NAME STEINWENDER, THEODORE L.
STREET ADDRESS 1901 TANGLEWOOD DR NE
CITY-ST-ZIP ST. PETERSBURG FL

TITLE VD ☒ DELETE

NAME TAYLOR, JAMES C.
STREET ADDRESS 5002 BARNWOOD TRAIL
CITY-ST-ZIP KENNESAW GA

TITLE S ☐ DELETE

NAME AUDREY F ROBINSON
STREET ADDRESS 3601 MANCHESTER DRIVE
CITY-ST-ZIP CHARLOTTE NC

TITLE PD ☒ DELETE

NAME PARTAIN, CLAUDE RAYMOND
STREET ADDRESS 3712 WOODY GROVE LANE
CITY-ST-ZIP CHARLOTTE NC

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

PRESIDENT
DAVID E. LA BOUNTY
J.A. JONES DRIVE
CHARLOTE, NC 28287

VICE PRESIDENT
HARRY E. ANGENENDT
1715 N. WESTSHORE DR.
TAMPA, FL 33607

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(b), 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, with all other like empowered.

SIGNATURE:

Audrey F. Robinson, SECRETARY

704-553-3074

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/198)