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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 844992

(8)

SUITT CONSTRUCTION CO., INC.

Principal Fla	roe of Business	Mailing Address				
P O BOX 8858 GREENVILLE SC 29804		P O BOX 8858 Greenville SC 29804-8858				
					3. Date incorporated or Qualified 01/16/1980	3a. Date of Last Report 02/26/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
21		26			57-0509435	Not Applicable
Suite, Apt. #, ctc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & State.		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Ζφ 24	Country 25	Zip 29	30	untry	8. This corporation has liability for in Florida Statutes	intangible tax under s. 199.032.] Yes 🏻 No
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				81 Name 82 Street		
	-			83		

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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

84 City

Signature ityle for printed name of registers diagers and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Charge Addition 1006 CEO 1.1 TOTALE SUITT, T.H. 1.2 NAME 1400 CLEVELAND ST STREET ADORESS 1.3 STREET ADDRESS **GREENVILLE SC** 1.4 CITY-\$1-7IP CHY-ST ZE DELETE Change Addition THEF 2.1 THLE SUITT, H.B. 2.2 NAME NAME 1400 CLEVELAND ST STREET ADDRESS 2.3 STREET ADDRESS **GREENVILLE SC** CHTY - ST - ZiP 2 4 CHY+ST-ZIP DELETE Change ___ Addition HILE 31 TITLE AIKEN, J.D., SR. MAME 3.2 NAME 1400 CLEVELAND ST 3.3 STREET ADDRESS STREET ADORESS **GREENVILLE SC** 3 4. CITY-ST-ZIP 001 x - S1 - 702 DELETE Change Addition THE 4.1 TITLE SUITT, T.H. 4 2 NAME NAVE 1400 CLEVELAND ST STREET ADDRESS 4.3 STREET ADDRESS GREENVILLE SC 4.4 CITY - ST - ZIP DELETE 51 TITLE Change Addition Lille CRONIN, J.W. 5.2 NAME NAME 1400 CLEVELAND ST STREET ADDRESS 5.3 STREET ADDRESS **GREENVILLE SC** 5.4 CITY - ST - ZIP C-TY-S1-70 DELETE Change Addition 6.1 TITLE WARREN,D. NAME 6.2 NAME 1400 CLEVELAND ST 6.3 STREET ADDRESS STREET ADDRESS. **GREENVILLE SC** 64 CITY-ST-ZIF CHY ST-Z-P

14. I do hereby certify that the information supplied with this filling 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 eath; that I am an officer or director of the corporation or the receiver or trustage empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Brock 13 in charged, or on an attachment with an address.

SIGNATURE:

Dayame Phone # 0499189

FILED

Apr 22 1997 8:00am

Secretary of State

Zip Code