

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

FILED

Jan 26, 1999 8:00am
Secretary of State

01-26-1999 90001 035 ****158.75



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/16/1981

4. FEI Number

56-0588260

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 owes the current year Intangible
Personal Property Tax.



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 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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PCD
NAME CROWDER, OTIS A
STREET ADDRESS 301 GREENGATE LANE
CITY-ST-ZIP CHARLOTTE NC 28211

DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

Change

Addition

TITLE VD
NAME CROWDER, W. T JR
STREET ADDRESS 3032 BACK CREEK CHURCH RD.
CITY-ST-ZIP CHARLOTTE NC 28213

DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Change

Addition

TITLE VD
NAME TUCKER, CANEY
STREET ADDRESS 10410 STONEMEDE LANE
CITY-ST-ZIP MATTHEWS NC 28105

DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change

Addition

TITLE ST
NAME FRANCIS, KARL S
STREET ADDRESS 106 SOUTH FORK DRIVE
CITY-ST-ZIP BELMONT NC 28012

DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change

Addition

TITLE V
NAME PRICE, KERRY K
STREET ADDRESS 9817 INDIAN TRAIL FAIRVIEW ROAD
CITY-ST-ZIP INDIAN TRAIL NC

DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change

Addition

TITLE CROWDER CONSTRUCTION COMPANY
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change

Addition

14. I hereby certify that the information supplied with this filing 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SKANATIRI REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)