

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 # 851345 (9)

1. Corporation Name
JAMES N. GRAY CONSTRUCTION CO., INC.



Principal Place of Business: **250 W MAIN ST STE - 2500 LEXINGTON KY 40507 US**
Mailing Address: **P.O. BOX 8330 LEXINGTON KY 40533-8330 US**

3. Date Incorporated or Qualified: **12/18/1981**
3a. Date of Last Report: **05/01/1995**

2. Principal Place of Business (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country (25)
2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

4. FEI Number: **61-0990546**
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

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
85 Zip Code **FL**

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: _____ (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	GRAY, C.C. HOWARD	
STREET ADDRESS	1867 PARKERS MILL RD.	
CITY-ST-ZIP	LEXINGTON KY	
TITLE	VS	<input type="checkbox"/> DELETE
NAME	GRAY, FRANKLIN N.	
STREET ADDRESS	301 S HANOVER	
CITY-ST-ZIP	LEXINGTON KY	
TITLE	VT	<input type="checkbox"/> DELETE
NAME	PARRISH, DANNY B.	
STREET ADDRESS	4021 WEBER WAY	
CITY-ST-ZIP	LEXINGTON KY	
TITLE	DC	<input type="checkbox"/> DELETE
NAME	GRAY, LOIS H	
STREET ADDRESS	HIGHLAND PARK	
CITY-ST-ZIP	GLASGOW KY	
TITLE	AT	<input type="checkbox"/> DELETE
NAME	PARKER, J. SCOTT	
STREET ADDRESS	2529 ABBEYWOOD PL	
CITY-ST-ZIP	LEXINGTON KY	
TITLE	EV	<input type="checkbox"/> DELETE
NAME	GRAY, JAMES P., II	
STREET ADDRESS	304 WEST THIRD ST	
CITY-ST-ZIP	LEXINGTON KY	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: *[Signature]* **ASST. TREASURER** 4/9/96 (606) 281-5000
Date: 4/9/96 Daytime Phone #: (606) 281-5000

CR2E034 (12/95)