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

PROFIT CORPORATION ANNUAL REPORT

4TH AVE

WEST POINT GA

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

852025

(6)

SOUTH	I CAROLINA ABLE CONST	RUCTION COMPANY, IN	IC.		
Principal Plac	e of Business	Mailing Address		L HERSDA HANGE BRITTA HANN ORDIN 1100) ON 110	Dit andtr graft gratt âlên ûlân indt
5 CENTURY DRIVE. SUITE 250 5 CENTURY DRIVE. SUITE POST OFFICE BOX 6018 POST OFFICE BOX 6018 GREENVILLE SC 29606 GREENVILLE SC 29606			E 250	DO NOT WRITE IN	THIS SPACE
GILLIANIELL	00 8000	OHELITHEEL OF EGODO		3. Date Incorporated or Qualified	
)				03/01/1982	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		57-0471147	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	
Zip	Country	Zip	Country	8. This corporation owes or has paid t	
24	25	29	30	Personal Property Tax due June 30	
	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New Regis	tered Agent
CT CORPORATION SYSTEM					
1200 S. PINE ISLAND ROAD			82 Street	Address (P.O. Box Number is Not Acceptable)	
PLANTATION FL 33324				·	
			83		
ļ			84 City		85 Zip Code
					FL " '
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Statute	es, the above-named	corporation submits this statement for the purp poration's board of directors. I hereby accept the	oose of changing its registered
agent. I a	im familiar with, and accept the obli	gations of, Section 607.0505, Flo	rida Statutes.	poration's board of directors, thereby accept to	le appointment as registered
SIGNATURE					
Signature, typed or printed manie of registered agent and title if applicable (NOTE			Registered Agent signature		DATE
12.		ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12 Change Addition
TITLE	PD TUOMAG A	Deceie.	1.1 T(TLE		C change C Addition
NAME	GOW, THOMAS A.		1.2 NAME		
STREET ADDRESS	520 DEAN ROAD		1.3 STREET ADDRESS		
CITY-ST-ZIP	GREER SC	DELETE	1.4 CITY - ST - ZIP		Change Addition
TITLE	VSTD	L Dereit	2.1 TITLE		Change Cl Applica
NAME OTOTET ADDRESS	RENTZ, MARION G.		2.2 NAME		,,
STREET ADDRESS	230 MERRIFIELD DR GREENVILLE SC		2.3 STREET ADDRESS	پ	4
CITY-ST-ZIP TITLE	VD VD	DELĒTE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME	GLOVER, EDMUND C	☐ bcccic	3.2 NAME		C curation C Meagaight
	4TH AVE		44		
STREET ADDRESS	WEST PT, GA 00000	•	3.3 STREET ADDRESS	1	
CITY+ST-ZIP TITLE	C	DELETE	3.4. CITY-ST-ZIP	 	Change Addition
	MOODY, RAYMOND L	C) Official	4.1 INCE 4.2 NAME		Onungo Muchilit
NAME STORET ADDRESS	4TH AVE				
STREET ADDRESS	WEST POINT GA		4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	VD VD	DELETE	4.4 City - St - ZiP 5.1 Title		Change Addition
	WALDREP, FRANKLIN E	L DECEN	5.2 NAME		T custoff T Vogition
NAME PERCET ADDRESS	5 CENTURY DRIVE SUITE 2	KΛ			
STREET ADDRESS	_ : _	ÚU .	5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	GREENVILLE SC D	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
	HOOD, CECIL G		4		L Grange L Agortion
NAME	INVUI, UEUIL U		6.2 NAME	l	ľ

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.

6.4 CITY - ST-ZIP

6.3 STREET ADDRESS

FILED

Mar 02 1998 8:00am

Secretary of State