

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Murtham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **854230** (0)
1. Corporation Name
A. G. C. CO.



Principal Place of Business: **200 S. ORANGE AVE., 23RD FLOOR, P. O. BOX 112, ORLANDO FL 32801-3410**
Mailing Address: **200 S. ORANGE AVE., 23RD FLOOR, P. O. BOX 112, ORLANDO FL 32801-3410**

3. Date Incorporated or Qualified: **09/30/1982** 3a. Date of Last Report: **02/22/1995**
4. FEI Number: **34-6519716** 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

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 25, 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent
**LINSCOTT, JERRY R.
200 S ORANGE AVE., 23RD FLOOR
ORLANDO FL 32801**

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 607.0402 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: _____ DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	MORITZ, MICHAEL E.	
STREET ADDRESS	65 EAST STATE STREET	
CITY - ST - ZIP	COLUMBUS OH	
TITLE	VSTD	<input type="checkbox"/> DELETE
NAME	GRUETTNER, DONALD W.	
STREET ADDRESS	3200 NATIONAL CITY CTR.	
CITY - ST - ZIP	CLEVELAND OH	
TITLE	V	<input type="checkbox"/> DELETE
NAME	LINSCOTT, JERRY R.	
STREET ADDRESS	200 S. ORANGE AVE. 23 FL	
CITY - ST - ZIP	ORLANDO FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	BALL, G. THOMAS	
STREET ADDRESS	200 S. ORANGE AVE. 23FL	
CITY - ST - ZIP	ORLANDO FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	FULTON, RICHARD T	
STREET ADDRESS	200 S. ORANGE AVE. 23 FL	
CITY - ST - ZIP	ORLANDO FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	WRIGHT, KENNETH C	
STREET ADDRESS	200 S ORANGE AVE, 23RD FL	
CITY - ST - ZIP	ORLANDO FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12

1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	O'Shea, Rosemary
1.3 STREET ADDRESS	200 S. Orange Ave., Ste. 2300
1.4 CITY - ST - ZIP	Orlando, FL 32801
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	500001818025
5.3 STREET ADDRESS	-05/13/96--01024--023
5.4 CITY - ST - ZIP	***200.00
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

5-1-96 AM

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 or person empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, unchanged, or in an attachment with my address:

SIGNATURE: *Kenneth Wright*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Kenneth Wright, Vice President
4-29-96 407-649-4000
DATE PHONE #

CR2E034 (12/95)