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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

**DOCUMENT # 855689** 

(6)

## FILED Jan 16 1997 8:00am Secretary of State

Principal Pla	ENBACH CONSTRUCTORS INC ace of Business FRLAND AVENUE TN 37919	Marling Address P.O. BOX 11087 KNOXVILLE TN 37939-108			
, <del>, ,</del>				3. Date Incorporated or Qualified	
				03/03/1983	06/12/1996
	Place of Business	2a. Mailing Address		4. FEt Number	Applied For
21		[26]		62-0843508	Not Applicable
	ot.#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & St	Pata	City & State		Plantin Committee Floraging	
	ecite:	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
<b>23</b> Ζιρ	Country	7(p	Country		or intangible tax under s. 199.032,
24	25]	29	30		Yes No
<del></del>	9. Name and Address of Current			10. Name and Address of New F	
Ci	T CORPORATION SYSTEM		81 Name		
1200 S. PINE ISLAND ROAD			82 Street A	ddress (P.O. Box Number is Not Accept	abla
	LANTATION FL 33324		Jez Sireel A	doress (F.O. Box Number is Not Accept	aolej
			83		
			04 04		lee Zie Oado
			84 City		FL 85 Zip Code
SIGNATURI	Stign thire, typed or printed rains of regions furjer	rad tas Papakeank (NOI	E. Registered Agent signature r		DATE DOCUMENT AND DESCRIPTION OF THE PROPERTY AND DESCRIPTION
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFF	FICERS AND DIRECTORS IN 12  Change Addition
T:TLF	CO	[] Darrie	1.1 TITLE		El Change El Addition
NAME	RENTENBACH, T. J.(CHRMN. 2400 SUTHERLAND AVE.		1.2 NAME		
STREET ADDRES	KNOXVILLE TN		1.3 STREET ADDRESS		
CHY-ST-ZIF TITLE	PD PD	DELE IE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	RENTENBACH, T M	LLI OFFE	22 NAME		
STREET ADDRES	A 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		2.3 STREET ADDRESS		
	KNOXVILLE TN		1		
City - ST - 7IP TITLE	VD VD	DELETE	2 4 CITY - ST - ZIP 3 1 TITLE		Change Addition
NAME	FREEMAN, DONALD W.		3.2 NAME		• •
STREET ADDRES	A 4 6 6 6 100 100 100 1 1 1 100 1 1 100		3.3 STREET ADDRESS		
CITY - S1 - ZIP	KNOXVILLE TN		3.4. CITY - ST - ZIP		
DH(F	TAS	DELETE	4.1 TITLE		Change Addition
NAME	RATCLIFF, GREG A		4. 2 NAME		
STREET ADDRES			4.3 STREET ADDRESS		
CITY-ST ZIF	KNOXVILLE TN		4.4 CITY-\$T-ZIP		
TITLE	8	DELETE	5.1 TITLE		Change Addition
NAME	RATCLIFFE, GREG A.		5.2 NAME		
STREET ADDRES			5 3 STREET ADORESS		
CHT-ST ZIP	KNOXVILLE TN		5 4 CITY-ST-ZIP		
THE	,377 W. 137 100 177	DELETE	6 1 TITLE		Change Addition
NAME			62 NAME		
STREET ADDRES	55		63 STREET ADDRESS		
A CONTRACTOR OF THE PARTY OF TH	··				
CITY - S1 - ZIP			64 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing oots not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information inclicated 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** 

Greg A Rat

A RATE LIFF

a. Rately

1-7-97

423-546-2440

Priority P