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May 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F34291

(7)

1. Corporation Name
BURL'S CONSTRUCTION, INC.

Principal Place of Business

1000 EAST CARROLL ST.
KISSIMMEE FL 34744

Mailing Address

1000 EAST CARROLL ST.
KISSIMMEE FL 34744-1451



2. Principal Place of Business

21 Suite, Apt. #, etc.
22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.
27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified
05/11/1981

3a. Date of Last Report
05/01/1996

4. FEI Number
59-2078721

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

~~MYNHIER, BURL R.~~
1000 EAST CARROLL ST.
KISSIMMEE FL 34744

10. Name and Address of New Registered Agent

81 Name Shawn D. Mynhier

82 Street Address (P.O. Box Number is Not Acceptable)

P.O. Box 70-1442

83 1000 E. CARROLL ST.

34744

84 City Kissimmee FL

85 Zip Code 34744

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 Shawn D. Mynhier (President)

5-6-97
DATE

12. OFFICERS AND DIRECTORS

TITLE PV
NAME MYNHIER, SHAWN
STREET ADDRESS 1000 EAST CARROLL ST.
CITY-ST-ZIP KISSIMMEE FL

TITLE ST
NAME MYNHIER, LOUISE
STREET ADDRESS 1000 EAST CARROLL ST.
CITY-ST-ZIP KISSIMMEE FL

TITLE D
NAME MYNHIER, BURL R.
STREET ADDRESS 1000 E CARROLL ST
CITY-ST-ZIP KISSIMMEE FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

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

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

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

14. I do 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.

SIGNATURE SIGNATURE DATE 4-17-97 (407) 348-0377

CR2E034 (9/96)