

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

FILED
Mar 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # F40180 (4)
1. Corporation Name
RANGER CONSTRUCTION INDUSTRIES, INC.

Principal Place of Business 101 SANSBURY'S WAY P O BOX 15065 WEST PALM BCH FL 33416	Mailing Address 101 SANSBURY'S WAY P O BOX 15065 WEST PALM BCH FL 33416
--	--



DO NOT WRITE IN THIS SPACE

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 06/08/1981	
4. FEI Number 59-2098662		5. Certificate of Status Desired <input type="checkbox"/>		Applied For Not Applicable	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		\$8.75 Additional Fee Required	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		9. Name and Address of Current Registered Agent DEFREHN, JOHN A. 101 SANSBURY'S WAY WEST PALM BEACH FL 33416		10. Name and Address of New Registered Agent	

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.		81 Name		82 Street Address (P.O. Box Number is Not Acceptable)		83		84 City		85 Zip Code	
---	--	---------	--	---	--	----	--	---------	--	-------------	--

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) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	ST	1.1 TITLE	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
NAME	DEFREHN, JOHN A	1.2 NAME	
STREET ADDRESS	881 PARK FOREST WAY	1.3 STREET ADDRESS	7 COMMANDERS DRIVE
CITY-ST-ZIP	WEST PALM BEACH FL	1.4 CITY-ST-ZIP	PALM BEACH GARDENS FL 33418
TITLE	VD	2.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	SLADE, MICHAEL	2.2 NAME	
STREET ADDRESS	149 SCARBOROUGH TERR	2.3 STREET ADDRESS	
CITY-ST-ZIP	W PALM BCH FL	2.4 CITY-ST-ZIP	
TITLE	AST	3.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	TAYLOR JOHN L	3.2 NAME	
STREET ADDRESS	14142 GREENTREE DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	WELLINGTON FL	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	JARRELL, SHELBY	4.2 NAME	
STREET ADDRESS	2523 25TH LANE	4.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BCH GARDENS FL	4.4 CITY-ST-ZIP	
TITLE	PD	5.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	VECELLIO, LEO A JR	5.2 NAME	
STREET ADDRESS	771 VILLAGE RD	5.3 STREET ADDRESS	
CITY-ST-ZIP	NORTH PALM BEACH FL	5.4 CITY-ST-ZIP	
TITLE	AST	6.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME	GWINN, L.L.	6.2 NAME	
STREET ADDRESS	MABSCOTT HILL ROAD	6.3 STREET ADDRESS	
CITY-ST-ZIP	BECKLEY, WVA	6.4 CITY-ST-ZIP	

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.

SIGNATURE:  3/6/98 561-713-9400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0318232

CR2E034 (10/97)

JAMES K. DRUK - V/P
4510 GLADES CUT-OFF ROAD
FT. PIERCE, FLA.

DAVID SCHULTA, ASST. S/T
4510 GLADES CUT-OFF ROAD
FT. PIERCE, FLA

DONALD HELMS - ASST S/T
101 SANBURY'S WAY
WEST PALM BEACH, FL

MIGUEL CORREA - V/P
101 SANBURY'S WAY
WEST PALM BEACH, FLA

RICHARD K. MARTIN - V/P
1801 S. NOVA ROAD
SO. DAYTONA, FLA

PETER MARKUM - V/P
1801 S. NOVA ROAD
SO. DAYTONA, FLA

JAMES VODENICKER - ASST S/T
1801 S. NOVA ROAD
SO. DAYTONA, FLA