

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **F57872** (6)

1. Corporation Name:

**GARY MITCHELL GRADING AND PAVING, INC.**

Principal Place of Business

% HARRY H MITCHELL  
103 N GADSDEN STREET  
TALLAHASSEE FL 32301-1507

Mailing Address

% HARRY H MITCHELL  
103 N GADSDEN STREET  
TALLAHASSEE FL 32301-1507



3. Date Incorporated or Qualified  
**12/09/1981**

3a. Date of Last Report  
**04/12/1995**

4. FEI Number  
**59-2146272**

Applied For  
Not Applicable

5. Certificate of Status Declared ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. Does corporation have liability for intangible tax under s. 199.032  
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

2. Principal Place of Business

21. Subst. Apt. #, etc.

22. City & State

23. Zip Country

2a. Mailing Address

26. Subst. Apt. #, etc.

27. City & State

28. Zip Country

9. Name and Address of Current Registered Agent

MITCHELL, HARRY H  
103 N GADSDEN STREET  
TALLAHASSEE FL 32302

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 609.0902 and 609.1506 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. Thereby, I, as the appointed registered agent, I am

SIGNATURE

Harry H. Mitchell, Attorney at Law

January 22, 1996

12. OFFICERS AND DIRECTORS

|                |                                          |                                 |
|----------------|------------------------------------------|---------------------------------|
| TITLE          | PD                                       | <input type="checkbox"/> DELETE |
| NAME           | MITCHELL, GARY M                         |                                 |
| STREET ADDRESS | JAX HWY, BOX 824, RT 7, 1107 Lasswell Dr |                                 |
| CITY, ST, ZIP  | TALLAHASSEE FL 32312                     |                                 |
| TITLE          | STD                                      | <input type="checkbox"/> DELETE |
| NAME           | MITCHELL, PENNY BOWLEY                   |                                 |
| STREET ADDRESS | JAX HWY, BOX 824, RT 7, 1107 Lasswell Dr |                                 |
| CITY, ST, ZIP  | TALLAHASSEE FL 32312                     |                                 |
| TITLE          |                                          | <input type="checkbox"/> DELETE |
| NAME           |                                          |                                 |
| STREET ADDRESS |                                          |                                 |
| CITY, ST, ZIP  |                                          |                                 |
| TITLE          |                                          | <input type="checkbox"/> DELETE |
| NAME           |                                          |                                 |
| STREET ADDRESS |                                          |                                 |
| CITY, ST, ZIP  |                                          |                                 |
| TITLE          |                                          | <input type="checkbox"/> DELETE |
| NAME           |                                          |                                 |
| STREET ADDRESS |                                          |                                 |
| CITY, ST, ZIP  |                                          |                                 |

13.

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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.0902, Florida Statutes. Further, I certify that the information indicated on this annual report is complete 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, and that I am authorized to execute this report as required by Chapter 609, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report.

SIGNATURE:

Gary M. Mitchell, President and  
Director

904

CR2E034 (12/95)