FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # F92000000287 (4)

1. Corporation Name

CCI CONSTRUCTION CO., INC.

Principal Place of Business
4720 OLD GETTYSBURG ROAD
MECHANICSBURG PA 17055

Mailing Address
4720 OLD GETTYSBURG ROAD
MECHANICSBURG PA 17055

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: 11/04/1992
3a. Date of Last Report: 07/03/1995
4. FEI Number: 25-1587897 — 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**

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 607.0502 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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CP	☐ DELETE	1 TITLE	☒ Change ☐ Addition
NAME	ORTENZIO, JOHN M		1 NAME	
STREET ADDRESS	4720 OLD GETTYSBURG ROAD		1 STREET ADDRESS	
CITY-ST-ZIP	MECHANICSBURG PA		1 CITY-ST-ZIP	Zip 17055
TITLE	VD	☐ DELETE	2 TITLE	☒ Change ☐ Addition
NAME	MILLER, SHANE A		2 NAME	
STREET ADDRESS	1110 MUSKET LANE		2 STREET ADDRESS	
CITY-ST-ZIP	MECHANICSBURG PA		2 CITY-ST-ZIP	Zip 17055
TITLE	STD	☒ DELETE	3 TITLE	☐ Change ☐ Addition
NAME	BARBER, DAVID		3 NAME	
STREET ADDRESS	111 BRINDLE ROAD		3 STREET ADDRESS	
CITY-ST-ZIP	MECHANICSBURG PA 17055		3 CITY-ST-ZIP	
TITLE	ASAT	☐ DELETE	4 TITLE	Secretary, Treasurer ☒ Change ☐ Addition
NAME	PHILLIPS, SHERI		4 NAME	
STREET ADDRESS	2221 ASPEN DRIVE		4 STREET ADDRESS	
CITY-ST-ZIP	MECHANICSBURG PA		4 CITY-ST-ZIP	Zip 17055
TITLE		☐ DELETE	5 TITLE	Douglas McAninch, VP ☐ Change ☒ Addition
NAME			5 NAME	3936 Brookridge Dr
STREET ADDRESS			5 STREET ADDRESS	Mechanicsburg, PA 17055
CITY-ST-ZIP			5 CITY-ST-ZIP	
TITLE		☐ DELETE	6 TITLE	☐ Change ☐ Addition
NAME			6 NAME	
STREET ADDRESS			6 STREET ADDRESS	
CITY-ST-ZIP			6 CITY-ST-ZIP	

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 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] Treas. 1/26/96 7179755640
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)