

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 # F92000000593 (5)

1. Corporation Name

DANIS HEAVY CONSTRUCTION COMPANY



Principal Place of Business

Mailing Address

ATTN: TAX DEPARTMENT  
2 RIVERPLACE, SUITE 300  
DAYTON OH 45401-0544  
US

ATTN: TAX DEPARTMENT  
P.O. BOX 544  
DAYTON OH 45401-0544  
US

3. Date Incorporated or Qualified  
12/09/1992

3a. Date of Last Report  
03/08/1995

2. Principal Place of Business

2a. Mailing Address

21 ATTN: Tax Dept  
Suite, Apt. #, etc. 2 Riverplace  
22 Suite 200

26 ATTN: Tax Dept  
Suite, Apt. #, etc. P.O. Box 1510  
27 City & State

23 DAYTON, OH  
24 Zip 45405 25 Country

28 Dayton, OH  
29 Zip 45401 30 Country

4. FEI Number  
31-1361002

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

10. Name and Address of New Registered Agent

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

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME: P  
SCHUTTE, HERBERT T  
STREET ADDRESS: 2 RIVERPLACE, SUITE 200  
CITY-ST-ZIP: DAYTON OH 45405

TITLE ☐ DELETE

NAME: V  
SEIFRIED, GEORGE C  
STREET ADDRESS: 2 RIVERPLACE, SUITE 200  
CITY-ST-ZIP: DAYTON OH 45405

TITLE ☐ DELETE

NAME: VAS  
FULLER, JAMES W  
STREET ADDRESS: 2 RIVERPLACE, SUITE 200  
CITY-ST-ZIP: DAYTON OH 45405

TITLE ☐ DELETE

NAME: VAS  
DOYLE, MICHAEL M  
STREET ADDRESS: 2 RIVERPLACE, SUITE 200  
CITY-ST-ZIP: DAYTON OH 45405

TITLE ☐ DELETE

NAME: VAS  
MONTGOMERY, JAMES S  
STREET ADDRESS: 2 RIVERPLACE, SUITE 200  
CITY-ST-ZIP: DAYTON OH 45405

TITLE ☒ DELETE

NAME: V  
ULLIMAN, MATTHEW S  
STREET ADDRESS: 2 RIVERPLACE, SUITE 200  
CITY-ST-ZIP: DAYTON OH 45405

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

Senior V.P.

Treasurer  
Darrell Hammond  
7288 Resinda Dr.  
Centerville, OH 45459

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)