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PROFIT CORPORATION ANNUAL REPORT



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

1996

F93000003556 (8) DOCUMENT #

CONSTRUCTION AND ARCHITECTURAL DESIGN, INC. Principal Place of Business Mailing Address 224 HONEYSUCKLE ROAD P.O. BOX 753 DOTHAN AL 36301 DOTHAN AL 36301 3. Date Incorporated or Qualified 3a. Date of Last Report 08/04/1993 08/09/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 63-1075921 Not Applicable Suite, Apt. #, etc. Suite, Apl. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees $Z_{\rm ID}$ Country $Z_{(i)}$ Country 8. This corporation has liability for intangible tax under s 199,032, 24 X Yes ☐ No 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 82 Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 **B**3 84 City Zip Code 85 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 the it applicable (NOTE_Registered Agent signature required when reinstating) DATE CR2E034 (12/95) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TIPLE DELETE 1 1 TITLE Change Addition HICKS, LARRY W NAMe 1.2 NAME 224 HONEYSUCKLE ROAD STREET ADDRESS. 13 STREET ADDRESS DOTHAN AL 36301 CITY-ST ZIF 14 DITY-ST-ZIP DELETE HILE 2 1 TITLE Change Addition MAHONE, W. KEY NAM 2 2 NAME 224 HONEYSUCKLE ROAD STREET ADDRESS. 2.3 STREET ADDRESS DOTHAN AL 36301 CHY ST-ZIP 2 4 CITY - ST - ZIP ST 1016 DELETE 3 1 1111 6 Change Addition SHAUGHNESSY, ELIZABETH A NAME 3.2 NAME 224 HONEYSUCKLE RD. STREET ADDRESS 3.3 STREET ADDRESS DOTHAN AL 36301 $C^{(i)}(Y+S^{(i)}+Z)^{(i)}$ 34 CITY - ST-ZIP TILE DELFTE ☐ Addition 4 1 TITLE ☐ Change NAM 4.2 NAME STREET ADOLESS. 4.3 STREET ADDRESS CHY-ST ZIF 4.4 CITY - ST - ZIP TITLE DELETE 5 1 THLE Change ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS OTY ST 70 54 CITY - ST - ZIP TITLE DELETE 6 1 TITLE ☐ Change ☐ Addition NAM: 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CID - \$1 - 20 E 4 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 12 or Block 13 if changed, or or an attachment with an address.

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