FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR -8 PM 2:59

DOCUMENT # F93000005728 (1)

1. Current Name

NETWORK CONSTRUCTION SERVICES, INC.

Principal Place of Business	Mailing Address
4020 WESTCHASE BLVD. SUITE 100 RALEIGH NC 27607	4020 WESTCHASE BLVD. SUITE 100 RALEIGH NC 27607

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/17/1993
3a. Date of Last Report: 03/04/1994

2. Principal Place of Business	2a. Mailing Address
21 3801 Lake Boone Trail	26 3801 Lake Boone Trail
Suite, Apt. #, etc. 22 Suite 310	Suite, Apt. #, etc. 27 Suite 310
City & State 23 Raleigh NC	City & State 28 Raleigh NC
Zip / Country 24 27607 / 25 USA	Zip / Country 29 27607 / 30 USA

4. FEI Number: 56-1846534 ☐ 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
THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301	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: _____ DATE
(Typed or printed name of registered agent and title if applicable) (If NEW Registered Agent, signature required when mandated)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	☐ Change ☐ Addition
NAME	STROHMEYER, FREDDY M	12 NAME	
STREET ADDRESS	640 E. KIVETT ST.	13 STREET ADDRESS	
CITY-ST-ZIP	ASHEBORO NC 27203	14 CITY-ST-ZIP	
TITLE	V	21 TITLE	☐ Change ☐ Addition
NAME	NANCE, RONNIE M	22 NAME	Delete
STREET ADDRESS	655 HORSE MOUNTAIN DR.	23 STREET ADDRESS	
CITY-ST-ZIP	ASHEBORO NC	24 CITY-ST-ZIP	
TITLE	STD	31 TITLE	☐ Change ☐ Addition
NAME	RANKIN, LAWSON A JR	32 NAME	
STREET ADDRESS	1512 LEANNE CT.	33 STREET ADDRESS	
CITY-ST-ZIP	RALEIGH NC 27606-4143	34 CITY-ST-ZIP	
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	WOLTZEN, HUGH A	42 NAME	
STREET ADDRESS	9690 DEERECO RD	43 STREET ADDRESS	
CITY-ST-ZIP	TIMONIUM MD	44 CITY-ST-ZIP	
TITLE	D	51 TITLE	☒ Change ☐ Addition
NAME	CRAWFORD, EDWARD K	52 NAME	Crawford, Edward K.
STREET ADDRESS	380 KNOLLWOOD ST, STE 600	53 STREET ADDRESS	380 Knollwood St, Ste 410
CITY-ST-ZIP	WINSTON SALEM NC	54 CITY-ST-ZIP	Winston Salem NC 27103
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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)(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 attached sheet with an address.

SIGNATURE: Lawson A. Rankin Jr. Lawson A. Rankin Jr. 2/14/95 (919) 781-0079
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — DATE — Daytime Phone #

0477661 FP