

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 10, 1999 8:00 am
Secretary of State

03-10-1999 90217 002 ***150.00

DOCUMENT # F95000002294

1. Corporation Name

FIRST SOUTH UTILITY CONSTRUCTION, INC.

Principal Place of Business

P.O. BOX 14280
GREENSBORO NC 27415

Mailing Address

P.O. BOX 14280
GREENSBORO NC 27415

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/10/1995

4. FEI Number

56-1812765

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 owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

STOVER, WILLIAM T
92140 US HWY. 1, SUITE 11
TAVERNIER FL 33070

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE C ☐ DELETE

NAME STOVER, WILLIAM T
STREET ADDRESS 151 DUBONNET ROAD
CITY-ST-ZIP TAVERNIER FL 33070

TITLE DP ☐ DELETE

NAME JONES, ROBERT A
STREET ADDRESS 2401-A MONTREAL AVE.
CITY-ST-ZIP GREENSBORO NC 27406

TITLE VSTD ☒ DELETE

NAME CROWSON, THOMAS B
STREET ADDRESS 2401-A MONTREAL AVE.
CITY-ST-ZIP GREENSBORO NC 27406

TITLE T ☒ DELETE

NAME SONRICKER, THOMAS K.
STREET ADDRESS 2401-A MONTREAL AVE.
CITY-ST-ZIP GREENSBORO NC

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE V ☐ Change ☒ Addition

1.2 NAME Baxter Hayes
1.3 STREET ADDRESS 2401 A Montreal Ave.
1.4 CITY-ST-ZIP Greensboro NC 27406

2.1 TITLE T ☐ Change ☒ Addition

2.2 NAME Jeffrey L. Mott
2.3 STREET ADDRESS 2401 A Montreal Ave.
2.4 CITY-ST-ZIP Greensboro NC 27406

3.1 TITLE V ☐ Change ☒ Addition

3.2 NAME Denny McCraw
3.3 STREET ADDRESS 2401 A Montreal Ave.
3.4 CITY-ST-ZIP Greensboro NC 27406

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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 attachment with an address, with all other like empowered.

SIGNATURE:

JEFFREY L. MOTT, TRSAS/CEO

Date

Daytime Phone #

CR2E034 (11/98)