SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE OH OR BFFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretrity of State

1996 DIVISION OF CORPORATIONS

DOCUMENT #

F95000003331 (4)

A.R. BUTLER CONSTRUCTION COMPANY, INC.

1996 REINSTATEMENT

Mailing Address

96 DEC -2 PH 1:28

SECRETARY OF STATE TALLAHASSEE, FLORIDA



P.O. BOX 380066 Birmingham al 35238		P.O. BOX 380066 Birmingham al 35238				
					3. Date Incorporated or Qualified 07/12/1995	3a. Date of Last Report
2. Principal Place of Bu	siness	2a. Mailing Address			4. FEI Number	Applied For
21		26			63-0756535	Not Applicable
Suite, Apt #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State			6. Election Campaign Financing	55.00 May Be
23		28	<u></u>		Trust Fund Contribution	Added to Fees
Zip	Country	Zip Country		ry	This corporation has liability for intangible tax under s. 199.032,	
24	25	29 30		Florida Statutes Yes No		
9. Name and Address of Current Registered Agent 10. Name and Address of New Regis						Istered Agent
C T CORPORATION SYSTEM				1 Name		
1200 SOUT	H PINE ISLAND ROAD		82 Street Addr		iress (P.O. Box Number is Not Acceptable)	
PLANTATIO	N FL 33324					
			8	3	-12/05/9	3601030015
			8	4 City	****375	
		Λ	-],		FL
11. Pursuant to the provisions of Sections 607,500 and 607,1509, prida Statutes, the above named corporation submits this statement for the purpose of changing its registered						
11. Pursuant to the provisions of Sections 607.0502 and 607.1503, portida 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 a provision of the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligance of the corporation of the corporation of the corporation.						
SIGNATURE Signature, typed or printed name of red (Leaf agent and title #Applicable (ROTE Regulated Agent signature required when renstating) DATE						
12.		DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE POT		DELETE	1.1 TITLE			Change Addition
NAME BUTL	er, alfred/8	v –	1.2 NAM	.		[
	HIGHWAY 280		13 STRE	ET ADDRESS		[9
	NGHAM AL		1.4 CITY			
TITLE VSD		DELETE	2.1 TITLE			Change Addition
1 177	er. Sandra s		2.2 NAM			
	HIGHWAY 280			ET ADORESS		i
	NGHAM AL		M	i		ļ
TITLE BIFUM	HOTEN AL	DELETE	2.4 CHY	'-ST-ZIP		Change Addition
1		r-1 occese	1	ļ	_	- Climite Climite
NAME			32 NAW	1		ļ
STREET ADDRESS				ET ADDRESS		
CITY - ST - ZIP		DELETE		·ST-ZIP		Chance Addition
TITLE		L'1 nere se	4.1 TITLE			Change Addition
NAME			4.2 NAV			021
STREET ADDRESS			4.3 STRE	ET ADORESS	INSTATEMEN	14410
CITY-ST-ZIP		T 1		-ST-ZIP	BLICAL BANGER	- Annah considerations
TITLE .		DELETE	5.1 TITLE	HE	HAO PLE	Change Addition
NAME			52 HAW	€ B		U. Www
STREET ADDRESS			5.3 STR	ET ADDRESS		17-2-9/
CITY - ST - ZIP			5.4 City	-ST-ZIP		1000
TITLE		DELETE	6.1 TITL	: T		Change Addition
NAME			62 HAM	E		ľ
STREET ADDRESS			6.3 STR	ET ADDRESS		· 1
CITY - ST - ZIP				-ST-ZIP		
	that the information supplied	i with this filling is voluntarily f			ify for the exemption stated in Section 1	19.07(3)(k), Florida Statutes, 1

further certify that the information supplied with this itting is voluntarily 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 offect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee ampowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.