FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

F95000004291 (9) **DOCUMENT #**

TECTONIC CONSTRUCTION, INC.



6325 RIG DADDY DRIVE

Principal Place of Business

6325 BIG DADDY DRIVE

Mailing Address

PANAMA CITY BEACH FL 32407		PANAMA CITY BEACH FL 32407						
		•			3. Date Incorporated or Qualified 09/06/1995	3a. Date of Last R	eport	
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number		Applied For	
21		26		95-3277003		Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required			
City & State		City & State	├ ─┐ '		Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees		
Zip 24	Country 25	Zip 29	Countr 30	У		res No		
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New R	egistered Agent		
			8	Name				
BURTON, DOROTHY 6325 BIG DADDY DR.				82 Street Address (P.O. Box Number is Not Acceptable)				
PANAMA CITY BEACH FL 32407			B:	3				
1744	Will Citt DENOTT L CETO		8	f City		85 Zi	p Code	
			ا	, ,		FL °' '	p = 0.00	
familiar w	rith, and accept the obligations of, Sec Signature, typed or printed name of registered age	ction 607.0505, Florida Stat	the control of the co		and of directors. I hereby accept the appropriate of whomenstangs	DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTO	ORS IN 12	
TITLE	PSCD	DELETE	1. 1 TiTL			☐ Change	☐ Addition	
NAME	BURTON, DOROTHY		1.2 NAM					
STREET ADDRESS	6325 BIG DADDY DR.		1.3 STRE	ET ADDRESS				
CiTY-S1-ZiP	PANAMA CITY BEACH FL		1.4 CITY	ST-ZIP				
TITLE	Ť	DELÉTE	2 1 TITLI			☐ Change	Addition	
NAME	NUOFFER, FRANCES B-	Γ	2.2 NAM	:				
STREET ADDRESS	129 PALM HARBOUR BL	/D:	2 3 STRE	ET ADDRESS				
C(TY - ST - Z(P	-PANAMA-CITY BEACH FL		2 4 CITY	- S1 - 21P		. <u> </u>		
TITLE		☐ DELETE	3. 1 TITL	i		Change	Addition Addition	
NAME			3.2 NAM					
STREET ADDRESS			3.3 STRS	E1 ADORESS				
CHY-ST-ZIP			3.4 CITY				- 1.18°	
TITLE		☐ DELETE	4. 1 TITL	E		☐ Change	☐ Addition	
NAME	1		4.2 NAM	£				
STREET ADDRESS			4.3 STRE	FT ADDRESS				
CITY-ST-ZIP		<u> </u>	4.4 CITY			Print Acc		
TOLE		DELETE	5 1 TITE			Change	☐ Addition	
NAME			5.2 NAM	E				
STREET ADDRESS			53 STRE	ET ADDRESS				
CITY-ST-ZIP			5.4 CITY	- ST- 2IP				

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 13 if changed, or on an attachment with an address.

6 1 TITLE

6.2 NAME

6 3 STREET ADDRESS

6.4 CITY - ST - ZIP

TillE

NAME

STREET ADDRESS

Buston DOROTHY BURTON 4-12-96 (904) 234-1668

DELETE

☐ Change ☐ Addition