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Feb 26 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # F96000003156 (4)

1. Corporation Name:  
SUPERFOS CONSTRUCTION MANAGEMENT, INC.



Principal Place of Business

4636 SCARBOROUGH DR  
LUTZ FL 33549

Mailing Address

4636 SCARBOROUGH DR  
LUTZ FL 33549-8506

2. Principal Place of Business

21 2999 Ross Clark Circle  
Suite, Apt. #, etc.

22 Suite 500

23 Dothan, AL

24 36301 25 U.S.

2a. Mailing Address

26 P.O. Box 8065  
Suite, Apt. #, etc.

27

28 Dothan, AL

29 36304 30 U.S.

3. Date Incorporated or Qualified

06/21/1996

3a. Date of Last Report

4. FEI Number 63-1175633  
NOT APPLICABLE

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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

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 DP  
NAME OWENS, CHARLES E  
STREET ADDRESS 381 TWITCHELL RD  
CITY-ST-ZIP DOTHAN AL 36303

DELETE

TITLE DV  
NAME PALMER, R ALAN  
STREET ADDRESS 381 TWITCHELL RD  
CITY-ST-ZIP DOTHAN AL 36303

DELETE

TITLE D  
NAME TORRENCE, SAMUEL M  
STREET ADDRESS 381 TWITCHELL RD  
CITY-ST-ZIP DOTHAN AL 36303

DELETE

TITLE S  
NAME WILLIAMS, JANE L  
STREET ADDRESS 381 TWITCHELL RD  
CITY-ST-ZIP DOTHAN AL 36303

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

Change Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

Change Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

Change Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

Change Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

Change Addition

14. I do 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.

SIGNATURE:

R. Alan Palmer  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/21/97 (334) 794-2198  
Date Daytime Phone #

CR2E034 (9/96)