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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600004276 (9)

**DUDLEY BARRETT CONSTRUCTION COMPANY** 

Principal Place of Business Mailing Address 936 HOLCOMB BRIDGE RD 936 HOLCOMB BRIDGE RD STE 2 DO NOT WRITE IN THIS SPACE ROSWELL GA 30076 ROSWELL GA 30076 UŚ 3. Date Incorporated or Qualified 08/21/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 58-2152944 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name **C T CORPORATION SYSTEM** 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 84 City 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 Statu 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. (NOTE Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Addition TITLE Change 11 TITLE BARRETT, DAVID NAME 1.2 NAME 12335 CHARLOTTE DRIVE STREET ADDRESS 1.3 STREET ADDRESS ALPHARETTA GA CITY-ST-ZIP 1.4 City-St-ZiP DELETE VS Change Addition TITLE 21 TITLE **DUDLEY, JEFF** NAME 2.2 NAME 855 GABLE GATE TURN STREET ADDRESS 2.3 STREET ADDRESS **ROSWELL GA** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELFTE THILE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE TITLE 4.1 TITLE Addition

14. Thereby 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 suppliemental 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 13 if changed, or on an attachment with an address

4. 2 NAME

5.1 TITLE

5.2 NAME

61 TITLE

6.2 NAME

DELETE

DELETE

4.3 STREET ADDRESS

5.3 STREET ADDRESS

63 STREET ADDRESS

64 CITY-ST-ZIP

5.4 CITY-ST-ZIP

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NAME

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TITLE

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Day 1 Bayll

2/17/98/17/1992-2702

**FILED** 

Feb 24 1998 8:00am

Secretary of State

CR2E034 (10/97)

Addition

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