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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # F96000004465 (8)

HAYS & SONS CONSTUCTION, INC.

171 S. HITTER AVE. INDIANAPOLIS IN 46219		INDIANAPOLIS IN 46219-7124						
						3. Date Incorporated or Qualified 08/28/1996	3a. Date of Last	Report
2. Principal P	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	1/	pplied For
21		26			_	35-1755242		lot Applicable
Suite, Apt.	#, etc	Suite: Apt. #, etc.				Certificate of Status Desired Sa.75 Additional Fee Regulred		
City & Stah	e	City & State		—		6. Election Campaign Financing		May Be
23		28				Trust Fund Contribution		I May Be I to Fees
Zip	Country Zip		 	Country		8. This corporation has liability for i		s. 199.032,
24 25 29			30			····		
	9. Name and Address of Curre	nt Registered Agent		aT.		10. Name and Address of New Re	gistered Agent	
FITZGERALD, THOMAS G				81 Name				
	1-D SW 22 CO. 1E FL 33317		82 Street Add		Street Addr	dress (P.O. Box Number is Not Acceptable)		
DAY	IE FL 33317		E	33				······································
			8	34	City		FI 85 Zip	Code
11. Pursuant office or ragent La	to the provisions of Sections 607.05(registered agent, or both, in the State im familiar with, and accept the oblig	02 and 607.1508, Florida Statu e of Florida. Such change was pations of, Section 607.0505, F	tes, the abo authorized lorida Statu	by tes	-named corp the corporat	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing of the appointment a	its registered s registered
SIGNATURE	,				, , , , , , , , , , , , , , , , , , , 		DATE	······································
12.	Signariza Type I or printed name of registred ag	AD DIRECTORS	13.	Ager -	it signature requi	red when reinstating) ADDITIONS/CHANGES TO OFFICE		RS IN 12
TITLE	PDC	DELETE	1.1 TITL	F		71001110110,011111101011011110	Change	
NAM:	HAYS, CHARLES R		1.2 NAM			10		
STREET ADDRESS	7602 CAROLLING WAY		- I		ADORESS			
City-S1-7iP	INDIANAPOLIS IN 46237		1.4 CITY	_				
TITLE	V	DELETE	2 1 TITL				Change	☐ Addition
NAME	HAYS, BRIAN R		2.2 NAM	1E				
STREET ADDRESS	700 VALLEY OAKS DR.		23 STRI	EET /	ADDRESS			
CITY ST ZIP	GREENWOOD IN 46143		2 4 011	Y+S	.⊺-ZI₽		, original of	
THE .	S	DELETE	3.1 TITL	£		•	Change	Addition
NAME	HAYS, MARK E		3 2 NAM	AE.			_/'	
STREET ADDRESS	1935 FRIENDSHIP DR.		3.3 STR	EET.	address 8	3406 LOOKOUT C	T _	
CITY-SI-7(P)	INDIANAPOLIS IN 46214		3.4. CIT	Y - S	J-ZIP	NOG LOOK OUT C	46217	
TITLE		☐ DELETE	4.1 TITL	E		,	Change	Addition
NAME			4. 2 NAM	ME				
SUBJECT ADDRESS			4.3 STR	EET A	ADDRESS			
CHY-ST-ZIP			4.4 CITY	/- <u>\$</u>]	I - ZIP		***************	
TITLE		☐ DELETE	5 1 TITL	E			Change	Addition
NAME			5.2 NAM	ΑE				
STREET ADDRESS			5.3 STR	EET.	ADDRESS			
Dity - ST - ZIP			5.4 CITY		1- Z IP			
THE		DELETE	6.1 TITL	E			Change	Addition
NAMÉ			6.2 NAN	AE				
STREET ADDRESS	1		6.3 STR	EET.	ADORESS			

6.4 CITY+ST-ZIP 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 truesee appowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of Block 13 of changed, or on an afta-himen) with an address.

appears in Block 12 or

FILED

Feb 06 1997 8:00am

Secretary of State