## 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 F96000004751 **DOCUMENT #**

BOVIS CONSTRUCTION CORP.

NEW YORK NY 10166		NEW YORK NY 10186-0005			ļ					
							3. Date Incorporated or Qualified 09/16/1996	3a. Date	of Last R	eport
2. Principal Plac	ce of Business	2a, Mailin	2a. Mailing Address				4. FEI Number	· <del>-1</del> · · · · · · · · · · · · · · · · · · ·	Ar	plied For
21		26					13-3907269		No	t Applicable
Suite. Apt. #, etc.		Suite,	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City 8	State				Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Zip Country		Zip	Zip Coun				8. This corporation has liability for intangible tax under s. 199.032,			
4	25	29	30	)				Yes 🔀		
Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY							10. Name and Address of New Re	gistered A	jent	
		PANT		8	1 Name	е				
1201 HAYS STREET TALLAHASSEE FL 32301-2525				8	2 Stree	t Addres	s (P.O. Box Number is Not Acceptab	ole)		
IACL	NI MODEL I E DEDOL'EDED			8	3					
				-					12-1	
				8				FL		Code
11. Pursuant to office or reg agent. I am	the provisions of Sections 607 gistered agent, or both, in the S familiar with, and accept the c	.0502 and 607.150 State of Ftorida. Suc obligations of, Secti	8, Florida Statutes, ch change was aut on 607.0505, Floric	the about horized da Statut	ve-name by the co es.	d corpor orporation	ation submits this statement for the p n's board of directors. I hereby accep	ourpose of control the appointment	hanging it ntment as	s registered registered
Signature Si	grishor", lyped or pooled make of register	ed agent and title if apprica	nble (NOTE: A	legistered A	gent signatu	ure required	when reinstating)	DATE		
12.	OFFICERS AND DIRECTORS 1		13,			ADDITIONS/CHANGES TO OFFICE	CERS AND I	DIRECTOR	RS IN 12	
TITLE	PDC		DELETE	1.1 Fitu			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	I	Change	Additio
NAME	COCHRANE, LUTHER P			1.2 NAM	E.	-				
STREET ADORESS	200 PARK AVE.			1.3 STRE	et address	s				
CITY-ST-ZIP	NEW YORK NY 10166			1.4 CITY	-ST-ZIP					
THLE	TOC YUBII US IOUN V		DELETE	2.1 TITL				Ĺ	Change	Additio
NAME	KUBILUS, JOHN V 200 PARK AVE.			2.2 NAM	_	1				
STREET ADDRESS	NEW YORK NY 10166				ET ADDRESS	S				
City+SI-7IP	DSC	·	Delete		- S1- ZIP				70	A state of the
THE	<b>~~~</b>		□ DELETE	3 1 TITLI	=	[		L	Change	Additio

CITY: \$1 - ZIP 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 composition 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 achment with an address.

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

54 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY - ST - ZIP

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME

61 TITLE

6 2 NAME

**X** DELETE

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SIGNATURE:

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STREET ADDRESS

CITY\_ST-ZIP

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CHY-S1-ZiP

SILVERMAN, ARTHUR C

**NEW YORK NY 10019** 

ARFSTEN, JEFFREY L

**NEW YORK NY 10166** 

BACON, CHARLES III

100-200 VILLAGE BLVD.

2400 YORKMONT RD., #200

PRINCETON NJ 08540

**CHARLOTTE NC 28217** 

ATKINS, LARRY C

40 W 57TH ST.

200 PARK AVE.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John V. Kubilus

Exec Vice President

New York, NY 10166

Exec Vice President

15230 Highgrove Road

Alpharetta, GA 30201

Pete Marchetto

Larry Beasley

200 Park Avenue

(212)592-6723

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**FILED** 

Apr 30 1997 8:00am

Secretary of State

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