


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

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FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90198 014 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F97000005445
 1. Corporation Name
WOHLSEN CONSTRUCTION COMPANY



Principal Place of Business 18 BOULDEN CIRCLE SUITE 16 NEW CASTLE DE 19720-3495	Mailing Address 18 BOULDEN CIRCLE SUITE 16 NEW CASTLE DE 19720-3495
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 10/16/1997	4. FEI Number 23-1542546	Applied For <input type="checkbox"/> No <input type="checkbox"/> Applicable
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
City & State 23	City & State 28	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip 29	Country 30	8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	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
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11. Pursuant to the provisions of Sections 607.0501 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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PC	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME LANGMUIR, J G		1.2 NAME	
STREET ADDRESS 548 STEEL WAY		1.3 STREET ADDRESS	
CITY-ST-ZIP LANCASTER PA 17601		1.4 CITY-ST-ZIP	
TITLE SM	<input type="checkbox"/> DELETE	2.1 TITLE VSD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME WOHLSEN, ROBERT S JR		2.2 NAME	
STREET ADDRESS 548 STEEL WAY		2.3 STREET ADDRESS	
CITY-ST-ZIP LANCASTER PA 17601		2.4 CITY-ST-ZIP	
TITLE V	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BRODIE, DAVID B		3.2 NAME	
STREET ADDRESS 18 BOULDEN CIRCLE SUITE 16		3.3 STREET ADDRESS	
CITY-ST-ZIP NEW CASTLE DE 19720-3495		3.4 CITY-ST-ZIP	
TITLE M	<input type="checkbox"/> DELETE	4.1 TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MANNING, RICHARD J		4.2 NAME	
STREET ADDRESS 548 STEEL WAY		4.3 STREET ADDRESS	
CITY-ST-ZIP LANCASTER PA 17601		4.4 CITY-ST-ZIP	
TITLE M	<input type="checkbox"/> DELETE	5.1 TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MCLEHINNY, WILSON D		5.2 NAME	
STREET ADDRESS 548 STEEL WAY		5.3 STREET ADDRESS	
CITY-ST-ZIP LANCASTER PA 17601		5.4 CITY-ST-ZIP	
TITLE 	<input type="checkbox"/> DELETE	6.1 TITLE V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME 		6.2 NAME R. EDWARD GORDON	
STREET ADDRESS 		6.3 STREET ADDRESS 548 STEEL WAY	
CITY-ST-ZIP 		6.4 CITY-ST-ZIP LANCASTER PA 17601	

14. I 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, with all other like empowered.

SIGNATURE: R. Edward Gordon Date: 3/31/99 Daytime Phone #: (717) 299-2500

CR2E034 (11/98)