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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STAT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # F9700006626 (2)

AMACHER BROS, CONSTRUCTION CO.

Principal Place of Business Mailing Address						A SERVER TOR SELLY MENT BRITT					
8327 DUNWOODY PL. DUNWOODY GA 30350				WOODY PL DY GA 30350		DO NOT WRITE IN THIS SPACE					
						3. Date Incorporated or Qualified 12/15/1997					
	Principal Place of Bus	iness	2a. Mailing	Address		4. FEI Number Applied For					
21			26			58-0832621 Not Applicable					
22	Suite, Apt. #, etc.		Suite, Ap	pt. #, etc.		5. Certificate of Status Desired Section 5. Status Desired Fee Required					
23	City & State		City & S 28	late		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
24	Zip	Country 25	7ip	30	untry	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes No					
9, Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324					81						
	PLANIATION	1 FL 33324			83	83					

			84 City		FL	85 2	b Cooe					
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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.												
SIGNATURE Signature: typed or printed facility of registered agent and filled applicable INOTE Registered Agent signature required when reinstating)  DATE												
12.	OFFICERS AND		13.	ADDITIONS/CHANGES	TO OFFICERS AND	DIRECTO	ORS IN 12					
TITLE	P	DELETE	1.1 TITLE		7	Chang	e Addition					
NAME	AMACHER, WILLIAM C		1.2 NAME									
STREET ADDRESS	5636 ROBERTS DR.		1.3 STREET ADDRESS									
CITY-ST-ZIP	DUNWOODY GA 30338		1.4 CITY-ST-ZIP		٠.							
TITLE	V	☐ DELETE	2 1 TITLE			Chang	e Addition					
NAME	HARMS, TIM G		22 NAME				Į.					
STREET ADDRESS	5390 HIDDENLAKE DR.		2.3 STREET ADDRESS									
CITY-ST-ZIP	CUMMING GA 33041		2. 4 CITY - ST - ZIP									
TITLE	ŠT	☐ DELETE	3.1 TITLE		T	Change	e 🔲 Addition					
NAME	AMACHER, ZACHERY C		3.2 NAME									
STREET ADDRESS	5698 BEN CREEK RD.		3.3 STREET ADDRESS									
CITY-ST-ZIP	DUNWOODY GA 30041		3.4. CITY-ST-ZIP									
TITLE		☐ DELETE	4.1 Title			Change	e 🔲 Addition					
NAMÉ			4.2 NAME				Į.					
STREET ADDRESS			4.3 STREET ADDRESS									
CITY - ST - ZIP			4.4 CITY - ST - ZIP									
TITLE		□ DELETE	5.1 TITLE			Change	e 🔲 Addition					
NAME			5.2 NAME									
STREET ADDRESS			5.3 STREET ADDRESS				ł					
CITY-ST-ZIP			5.4 CITY - ST - ZIP									
TITLE		DELETE	6.1 THILE			Change	e 🔲 Addition					
NAME			6.2 NAME				į					
STREET ADDRESS			6 3 STREET ADDRESS									
CITY - ST - ZIP			6.4 CITY-ST-ZIP									
14. Thereby certify that the information of blied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information												

14. I hereby certify that the information purplied 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 path; that I am an officer or director of the corporation of 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. Chapter 607 an altaquired with an address.

SIGNATURE:

CACHELLY CAMBELALL SEC. 3/12/98 70650500

CH2E(34 (10/97)

**FILED** 

Mar 18 1998 8:00am

Secretary of State