

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

FILED
Mar 17 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F97677 (1) 1. Corporation Name HARTLEY BROTHERS CONSTRUCTION, INC.			
Principal Place of Business ST ROAD 235N P O BOX 1627 ALACHUA FL 32615		Mailing Address ST ROAD 235N P O BOX 1627 ALACHUA FL 32616-1627	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
3. Date Incorporated or Qualified 09/01/1982		3a. Date of Last Report 06/21/1996	
4. FEI Number 59-2315858		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent HARTLEY, ROBERT L STATE ROAD 235 N POB 1627 ALACHUA FL 32615		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	
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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE _____ DATE _____ (NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME: PD HARTLEY, ROBERT L 12.2 STREET ADDRESS: ST ROAD 235 N POB 1627 12.3 CITY-STATE-ZIP: ALACHUA, FL 00000 12.4 CITY-STATE-ZIP: STD 12.5 NAME: HARTLEY, PHILLIP W 12.6 STREET ADDRESS: RT1 BX 353 F1 ST RD 2355 12.7 CITY-STATE-ZIP: ALACHUA, FL 32615 12.8 CITY-STATE-ZIP: ALACHUA, FL 32615 12.9 CITY-STATE-ZIP: ALACHUA, FL 32615 12.10 CITY-STATE-ZIP: ALACHUA, FL 32615 12.11 CITY-STATE-ZIP: ALACHUA, FL 32615 12.12 CITY-STATE-ZIP: ALACHUA, FL 32615 12.13 CITY-STATE-ZIP: ALACHUA, FL 32615 12.14 CITY-STATE-ZIP: ALACHUA, FL 32615 12.15 CITY-STATE-ZIP: ALACHUA, FL 32615 12.16 CITY-STATE-ZIP: ALACHUA, FL 32615 12.17 CITY-STATE-ZIP: ALACHUA, FL 32615 12.18 CITY-STATE-ZIP: ALACHUA, FL 32615 12.19 CITY-STATE-ZIP: ALACHUA, FL 32615 12.20 CITY-STATE-ZIP: ALACHUA, FL 32615 12.21 CITY-STATE-ZIP: ALACHUA, FL 32615 12.22 CITY-STATE-ZIP: ALACHUA, FL 32615 12.23 CITY-STATE-ZIP: ALACHUA, FL 32615 12.24 CITY-STATE-ZIP: ALACHUA, FL 32615 12.25 CITY-STATE-ZIP: ALACHUA, FL 32615 12.26 CITY-STATE-ZIP: 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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 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 in an addendum with an address.			
SIGNATURE: Robert L Hartley		3/10/97	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone: #	

CR2E034 (9/96)