

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

FILED
Apr 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **G09317** (0)
1. Corporation Name
ORLANDO INDUSTRIAL CONTRACTORS, INC.

Principal Place of Business 1230 W LANDSTREET RD ORLANDO FL 32824 US	Mailing Address PO BX 590728 ORLANDO FL 32859-0728 US
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DO NOT WRITE IN THIS SPACE

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 11/23/1982	
				4. FEI Number 59-2232423	
				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	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent TALBERT, MARTIN 708 29TH ST. ORLANDO FL 32805				10. Name and Address of New Registered Agent 81 Name MURPHY, GERALDINE 82 Street Address (P.O. Box Number is Not Acceptable) 1700 Eastern Ave. 83 84 City St. Cloud FL 85 Zip Code 34769-5440			
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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 *Geraldine Murphy* April 3, 1998
Signature, typed or printed name of registered agent and his/her application (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	DVP	<input type="checkbox"/> DELETE		1.1 TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	TALBERT, BETTY M			1.2 NAME	TALBERT, BETTY M.		
STREET ADDRESS	708 29TH ST			1.3 STREET ADDRESS	706 29TH ST		
CITY-ST-ZIP	ORLANDO, FL 00000			1.4 CITY-ST-ZIP	ORLANDO FL 32805		
TITLE	DP	<input checked="" type="checkbox"/> DELETE		2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	TALBERT, MARTIN			2.2 NAME			
STREET ADDRESS	708 29TH ST			2.3 STREET ADDRESS			
CITY-ST-ZIP	ORLANDO, FL 00000			2.4 CITY-ST-ZIP			
TITLE	DT	<input type="checkbox"/> DELETE		3.1 TITLE	D/T/S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MURPHY, GERALDINE			3.2 NAME			
STREET ADDRESS	1700 EASTERN AVENUE			3.3 STREET ADDRESS			
CITY-ST-ZIP	ST. CLOUD, FL 34769			3.4 CITY-ST-ZIP			
TITLE	S	<input type="checkbox"/> DELETE		4.1 TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	COCHRAN, ALAN L.			4.2 NAME			
STREET ADDRESS	2616 ORCHID LANE			4.3 STREET ADDRESS			
CITY-ST-ZIP	KISSIMMEE FL			4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

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.

SIGNATURE: *Geraldine Murphy*

April 3, 1998 (407) 843-8133

CR2E034 (10/97)