


FILED

Apr 17 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1997</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Northam</b> Secretary of State DIVISION OF CORPORATIONS
<b>DOCUMENT # G33874 (0)</b> <b>1. Corporation Name</b> <b>CLASS "A" BUILDERS, INC.</b>		
<b>Principal Place of Business</b> <b>4539 SW 6TH AVE</b> <b>CAPE CORAL FL 33914</b>		<b>Mailing Address</b> <b>4539 SW 6TH AVE</b> <b>CAPE CORAL FL 33914-6423</b>
<b>2. Principal Place of Business</b> <b>21</b> Suite, Apt. #, etc. <b>22</b> City & State <b>23</b> Zip <b>24</b> Country		<b>2a. Mailing Address</b> <b>26</b> Suite, Apt. #, etc. <b>27</b> City & State <b>28</b> Zip <b>29</b> Country
<b>g. Name and Address of Current Registered Agent</b> <b>NORTON, JOHN J</b> <b>4539 SW 6TH AVE</b> <b>CAPE CORAL FL 33914</b>		
		<b>81</b> Name <b>82</b> Street Address <b>83</b> City <b>84</b> State
<b>11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation, office or registered agent, or both, in the State of Florida, such change was authorized by the corporation, agent, I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.</b> <b>SIGNATURE</b> <i>John J. Norton</i> <i>[Signature]</i> <small>Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required)</small>		
<b>12. OFFICERS AND DIRECTORS</b>		
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<b>P</b> <b>NORTON, JOHN J</b> <b>4539 SW 6TH AVE</b> <b>CAPE CORAL FL 33914</b>	<input type="checkbox"/> DELETE
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<b>T</b> <b>NORTON, JOHN J</b> <b>4539 SW 6TH AVE</b> <b>CAPE CORAL FL 33914</b>	<input type="checkbox"/> DELETE
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<b>S</b> <b>NORTON, JOHN J</b> <b>4539 SW 6TH AVE</b> <b>CAPE CORAL FL 33914</b>	<input type="checkbox"/> DELETE
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>		<input type="checkbox"/> DELETE
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>		<input type="checkbox"/> DELETE
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>		<input type="checkbox"/> DELETE
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>		<input type="checkbox"/> DELETE
<b>13.</b>		
<b>1.1 TITLE</b> <b>1.2 NAME</b> <b>1.3 STREET ADDRESS</b> <b>1.4 CITY - ST - ZIP</b>		
<b>2.1 TITLE</b> <b>2.2 NAME</b> <b>2.3 STREET ADDRESS</b> <b>2.4 CITY - ST - ZIP</b>		
<b>3.1 TITLE</b> <b>3.2 NAME</b> <b>3.3 STREET ADDRESS</b> <b>3.4 CITY - ST - ZIP</b>		
<b>4.1 TITLE</b> <b>4.2 NAME</b> <b>4.3 STREET ADDRESS</b> <b>4.4 CITY - ST - ZIP</b>		
<b>5.1 TITLE</b> <b>5.2 NAME</b> <b>5.3 STREET ADDRESS</b> <b>5.4 CITY - ST - ZIP</b>		
<b>6.1 TITLE</b> <b>6.2 NAME</b> <b>6.3 STREET ADDRESS</b> <b>6.4 CITY - ST - ZIP</b>		
<b>14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Block 12 or Block 13 if changed, or on an attachment with an address.</b>		
<b>SIGNATURE:</b> <i>John J. Norton</i> <i>[Signature]</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		



CR2E034 (9/96)