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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G53506

(3)

GRANGER ASPHALT PAVING, INC.

FILED
Jan 22 1997 8:00am
Secretary of State

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Principal Place of Business		Mailing Address					i kabiliti debi astaa biidi biili dalib giili dibii bidis dibii dibis dibis dibis dibis dibis			
	ranger Street, unit a POB 3358 FL 32405-6312	% GERALD GRANGER 2405 E 17TH STREET. UNIT A POB 3358 PANAMA CITY FL 32405-6312				358	1 1 1			
							 Date Incorporated or Qualified 06/10/1983 		ite of Last R 17/1996	eport
2. Principal P	face of Business	2a. Ma	ing Address				4. FEI Number		Ar	oplied For
21		26					59-2422165			ot Applicable
Suite, Apt.	#, etc		e Apt. #, etc.				5. Certificate of Status Desired			Additional
22		27	6.0						Fee Re	
City & Stat	0		& State				6. Election Campaign Financing			May Be
23	Country	28		7 6			Trust Fund Contribution		Added	
Zip	Country	Zip			untry	1	8. This corporation has liability for	r intangible Yes		. 199.032,
24	25 g. Name and Address of Curre	29	Agent	30	7		Ftorida Statutes 10. Name and Address of New F			
		ent nogiatered	Agent	· · · · · · · · · · · · · · · · · · ·	81	Name	IV. Halle and Address of New P	redistrier :	- Your	
	ANGER, GERALD				[
	5 E 17TH STREET				82	Street Add	lress (P.O. Box Number is Not Accept	able)		
UNI					83					
PAN	NAMA CITY FL				83					
					84	City			85 Zip	Code
					L			FL		
11. Pursuant office or r	to the provisions of Sections 607.03 registered agent, or both, in the Stat	502 and 607 16 to of Florida, Si	i08, Florida Stat Jich change was	utes, the a s authorize	abovi ad be	e-named cor the cornora	poration submits this statement for the tion's board of directors. I hereby acc	purpose of ept the app	changing it ointment as	ts registered registered
agent I a	m famil ar with, and accept the obli	gations of, Sec	tion 607.0505, I	Florida Sta	tute	i in corpora	mon a bodina an directoria. I mereby dec	opi ino upp	Oli Ipi Ioi II aq	rogisiolos
SIGNATURE									_	
	Suppriore: Epical or ported harve or corpolered a					ont signature requ	ired when reinstating)	DATE		
12.	r	ND DIRECTOR		13.			ADDITIONS/CHANGES TO OFF	ICEHS AND		
TITLE	PST		LL DELETE		TITLE	ľ			Change	Addition
NAME	GRANGER, THOMAS G.			121	NAME					
STREET ADDRESS	1203 VIRGINIA AVENUE			135	STREET	ADDRESS				
CITY - ST - ZIP	LYNN HAVEN FL				CITY - S	I - ZIP				
TITLE	\ \ \ \		☐ DELFTE	2.1 1	TITLE				Change	Addition
NAME	GRAMGER. ROGER D			2.21	NAME	ľ				
STREET ADDRESS	312 MISSOURI AVENUE			2.3 9	STREET	ADDRESS				
CITY-ST-Z-P	LYNN HAVEN FL			2.4	CITY-	ST - ZIP				
T-TL E			DELETE	311	TITLE				☐ Change	Addition
NAME				3.21	NAME	-				
STREET ADDRESS				3.3 5	STREET	ADDRESS				
CHY+ST ZIP				3.4	CITY-	ST-ZIP				
TITLE			DELETE	4.1 1	TITLE				Change	Addition
NAME				4 2	NAME	}				
STREET ADDRESS				4.3 5	STREET	ADDRESS				
City-St Zip						31~2IP	·			
TITLE			DELETE		TITLE				Change	Addition
NAMÉ					NAME	[•			
STREET ADDRESS						ADDRESS	.*			
CITY - \$1 - ZIF	l t			-	CATY - S					
17LE			DELETE		TITLE	,, 611			Change	Addition
NAME					NAME					
						ADDDECC				
STREET ADDRESS				1		ADDRESS				
City-St-Z#				6.4	CIT <u>Y-S</u>	ST-ZIP				

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 and cated on this annual report of 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:

IGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

1-13-97

904-769-6640

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