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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # **G68619**

(7)

SUPERIOR PLASTER AND STUCCO, INC.

| SUFE | NION FEASIEN AND STOCK | 00; INO; | | | | |
|--|---|-------------------------------------|--|--|--|--|
| Principal Place | of Business | Mailing Address | | | E HERVIII RAIN ALIDI IRIIN BILBI I | ININ INIA NINIFARMII AINII AFNII NIBIL ULURI |
| C/O GEROGE H. DEVANEY, JR. RT 2 BOX 1967 HIGH SPRINGS FL 32643 | | RT 2 BOX 1967 | C/O GEROGE H. DEVANEY, JR. RT 2 BOX 1967 HIGH SPRINGS FL 32643 | | | |
| | | | THOSE OF SHOOT IS GETTO | | 3. Date Incorporated or Qualified 11/09/1983 | 3a. Date of Last Report 04/10/1995 |
| | | 2a. Mailing Address | . Mailing Address | | 4. FEI Number | Applied For |
| <u> </u> | | 26 | L | | 59-2302480 | Not Applicable |
| | | 27 | L | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & State | | City & State | | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Ζ(ρ) | Country 25 | 7/p 29 | 30 Co. | ntry | This corporation has liability for Florida Statutes | intangible tax under si 199.032, si ∏No |
| | Name and Address of Current | Registered Agent | | | 10. Name and Address of New I | Registered Agent |
| | | | | 81 Name | | |
| DEVANEY, GEORGE H. JR. | | | 82 Street A | ddress (P.O. Box Number is Not Acceptable) | | |
| RT 2 B | | | | | <u> </u> | |
| HIGH S | PRINGS FL 32643 | | | 83 | | |
| | | | | 84 City | | 85 Zip Code |
| | | | | | | FL 183 ZP COOS |
| or registere | o the provisions of Sections 607.0502 id agent, or both, in the State of Florid ii. and accept the obligations of, Sectio | a. Such change was authoriz | ed by the o | ve-named co corporation's l | rporation submits this statement for the puboard of directors. Thereby accept the app | urpose of changing its registered office pointment as registered agent. I am |
| SIGNATURE | | | | | | |
| S | Signature its cool on printed name of registeres a joil ta | | | Agent signature re | spired which ocidating | DATE |
| 12. | OFFICERS AND | | 13. | | ADDITIONS CHANGES TO OF | FICERS AND DIRECTORS IN 12 |
| TI*LE | DP | □ DELETÉ | 1 1 1 | | | ☐ Change ☐ Addit.on |
| NAME | DEVANEY JR, GEORGE H | | 12 N. | ŀ | | |
| STREET ADDRESS | ROUTE 1 BOX 417 | | L | REET ADDRESS | | |
| CHTY+ST-ZIP TITLE | HIGH SPRINGS, FL 00000 D | DELETE | 2 1 | ly-\$I-ZP | and the second s | Change Addition |
| NAME | DEVANEY, STEVEN J. | | 2 2 N | | | Shango Adan on |
| STREET ADDRESS | 3824 NW 34TH PLACE | | | REET ADDRESS | | |
| CHTY - ST - ZIP | GAINESVILLE FL | | | TY-S!-ZP | | |
| TITLE | DVS | DELETE | 3 1 T | | The state of the s | Change Addition |
| NAME | DEVANEY, GEORGE H JR | | 3 2 N. | | | |
| STREET ADDRESS | RT 2 BOX 1967 | | | FREET ADDRESS | | |
| CITY-ST-ZIP | HIGH SPGS FL | | | TY - S1 - ZIP | | |
| TITLE | | DEL ETE | 4 1 [| | | ☐ Change ☐ Addition |
| NAME | | | 4 2 N | AME | | |
| STREET ADDRESS | | | 4.3 \$ | REE! ADDRESS | | |
| CITY - ST - ZIP | | | 44C | TV - ST - ZIP | | |
| TITLE | □ DELETE 5.1 | | ITLE | | Change Addition | |
| NAME | | | 5 2 N | AME | | |
| STREET ADDRESS | | | 538 | REET ADDRESS | | |
| CITY - ST - ZIP | | | 54 C | TV - \$1 - ZIP | | |
| TITLE | | ☐ DELETE | 6 1 1 | TLE | | Change Addition |
| NAME | | | 62 N | AME | | |
| STREET ADDRESS | | | 638 | REET ADDRESS | | į |
| CITY - ST - ZIF | | | | TY ST-ZIP | | |
| 14 Ldo harabi | contify that the information conviors w | itte this filera is valuatable fore | sehed and | rione not aux | Ltd for the evenintion stated in Section 110 | 0.02(9)(k) Florida Statutoc I further 1 |

a. I do nereby certify that the information supplied with this hing is voluntarily turnished and does not qually for the exemption stated in Section 119.0763(R). Florida Statutes. Trurther 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 unider 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 an analyzers.

SIGNATURE:

SIGNATURE:

SIGNATURE SIGNATURE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

- TOEU34 (12/9