SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996 AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) · \_PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Morthani **FILED** ANNUAL REPORT Secretary of State Aug 15 1996 8:00 am DIVISION OF CORPORATIONS 1996 Secretary of State DOCUMENT # (8)H09884 L.F. HAYES CONSTRUCTION COMPANY, INC. Principal Place of Business Mailing Address 2280 OCEAN SHORE BLVD 2280 OCEAN SHORE BLVD ORMOND BEACH FL 32176-2847 ORMOND BEACH FL 32176-2847 3. Date Incorporated or Qualified 3a. Date of Last Report 06/27/1984 01/30/1995 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business 59-2433824 Not Applicable 21 26 Suite, Apt. #, etc Suite Apt. #, etc \$8.75 Additional 5. Certilicate of Status Desireo Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Added to Fees Trust Fund Contribution Zip Country Country 8. This corporation has liability for intangible tax under s. 199 032 25 Florida Statutes Yes No 24 29 30 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent Name CORPORATION INFORMATION SERVICES, INC. 1201 HAYES STREET 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 83 City 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. Thereby accept the appointment as registered agent. Lam familiar with land accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature, type Longer destinal le of registered agent and title it applicable Thirt E. Bud stered Agent sanative required when parefative (3/96) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE HAYES, L.F. L2 NAMI CR2E034 2280 OCEAN SHORE BLVD STREET ADDRESS 1.3 STREET ADDRESS ORMOND BEACH FL CITY - ST - ZIP 1.4 CHY+ST-ZIP Change Addition DELETE 21 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2 4 CITY - ST-ZIF DELETE 3.1 HILE Change Addition 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3 4 CITY - S.[ - ZIP DELETE Change Addition TITLE 4.1 TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 44 CITY - ST - ZIP **2000019235**5 -08/15/96--01078--02 DELETE 5 1 TITLE TITLE 5.2 NAME NAME \*\*\*375.00 STREET ADDRESS 53 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 61 Table ₽ITL€ NAME 6.2 NAME STREET ADDRESS 6 3 STREET ADDRESS 14. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(x). 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 trusted empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears i or on an attachment with an address

D NAME OF SIGNING OFFICER OR DIRECTOR

**SIGNATURE:**