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May 07 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H38954 (4)
1. Corporation Name
PITTMAN'S CANTONMENT BUILDING MATERIALS, INC.



Principal Place of Business

% LARRY O. PITTMAN
990 HIGHWAY 29 NORTH
CANTONMENT FL 32533

Mailing Address

% LARRY O. PITTMAN
990 HIGHWAY 29 NORTH
CANTONMENT FL 32533-9510

2. Principal Place of Business

21 155 HARVEST HILL DR
Suite, Apt. #, etc.

22 City & State
CANTONMENT, FL

23 Zip Country
32533 ESCAMBIA

24 32533 25 ESCAMBIA

2a. Mailing Address

26 155 HARVEST HILL DR
Suite, Apt. #, etc.

27 City & State
CANTONMENT, FL

28 Zip Country
32533 ESCAMBIA

29 32533 30 ESCAMBIA

3. Date Incorporated or Qualified

01/22/1985

3a. Date of Last Report

01/23/1996

4. FEI Number

59-2480801

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

PITTMAN, LARRY O.
990 HIGHWAY 29 NORTH
CANTONMENT FL 32533

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

155 HARVEST HILL DR.

83

84 City

CANTONMENT

FL

85 Zip Code

32533

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

Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature is required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D
PITTMAN, LARRY O.
155 HARVEST HILL DR
CANTONMENT FL 32533

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DST
PITTMAN, JANICE E.
155 HARVEST HILL DR
CANTONMENT FL 32533

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

7.1 TITLE 7.2 NAME 7.3 STREET ADDRESS 7.4 CITY-ST-ZIP

8.1 TITLE 8.2 NAME 8.3 STREET ADDRESS 8.4 CITY-ST-ZIP

9.1 TITLE 9.2 NAME 9.3 STREET ADDRESS 9.4 CITY-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 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: [Signature] DATE: [Date]

CR2E034 (9/96)