

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # J24870 (4)

1. Corporation Name

SIMES CONSTRUCTION COMPANY INC.



Principal Place of Business

Mailing Address

% CARROLL SIMES  
9612 RIVERSIDE DR  
SEBASTIAN FL 32958

Simes Construction Co. Inc.  
4040 Hickory St.  
Sebastian, FL  
32976

LL SIMES  
RSDR DR #201  
N FL 32958

3. Date Incorporated or Qualified

07/21/1986

3a. Date of Last Report

04/11/1995

2. Principal Place of Business

2a. Mailing Address

21 4040 Hickory St.

26 SAME

4. FEI Number

26-4640361

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

10. Name and Address of New Registered Agent

SIMES, CARROLL  
9612 RIVERSIDE DR #201  
SEBASTIAN FL 32958

81 Name

Carroll SIMES

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

4040 Hickory St.

83 SEBASTIAN, FL.

32976

84 City

FL

85 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. 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

Carroll SIMES

(NOTE: Registered Agent signature required when reinstating)

4/25/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP  
NAME SIMES, CARROLL  
STREET ADDRESS 9612 #201 RIVERSIDE DR  
CITY-ST-ZIP SEBASTIAN FL

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
4040 Hickory St.  
SEBASTIAN, FL. 32976

TITLE V  
NAME SIMES, GENEVA  
STREET ADDRESS 9612 #201 RIVERSIDE DR  
CITY-ST-ZIP SEBASTIAN FL

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
4040 Hickory St.  
SEBASTIAN, FL. 32976

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 unchanged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Carroll SIMES

Date

4/25/96

Daytime Phone #

A07-66A-4672

CR2E034 (12/95)