

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

3-8-95 5-19-94

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

DOCUMENT # J43031 (0)

95 MAR - 8 PM 2:06

1. Corporation Name
TOWERMARC CONSTRUCTION CORP.

Principal Place of Business Mailing Address
*** DAVID G. MULLOCK
ONE HARBOUR PLACE
TAMPA FL 33602**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 11/18/1986		3a. Date of Last Report 03/16/1994	
4. FEI Number 58-1714461		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under S. 190.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>	
23 Zip Country	29 Zip Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
MULLOCK, DAVID G. ONE HARBOUR PLACE 5TH FLOOR TAMPA FL 33602		81 Name SCOTT I. PEEK, JR.	
		82 Street Address (P.O. Box Number is Not Acceptable) 1311 N. WESTSHORE BLVD. # 1130	
		83	
		84 City TAMPA	
		85 FL Zip Code 33607	

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 SCOTT I. PEEK, JR. DATE 1/30/95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DV	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARRIS, MICHAEL E.	1.2 NAME	
STREET ADDRESS	6410 POPLAR, STE 300	1.3 STREET ADDRESS	
CITY-ST-ZIP	MEMPHIS TN	1.4 CITY-ST-ZIP	
TITLE	CPD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VINIADIS, POLYVIOS C.	2.2 NAME	
STREET ADDRESS	2 PICKWICK PLAZA, 4TH FLOOR	2.3 STREET ADDRESS	
CITY-ST-ZIP	GREENWICH CT	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(a), 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 employed, or on an attachment with an address.

SIGNATURE: Michael E. Harris DATE: 1/30/95 SIGNATURE: 901 683 2444