

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

APPROVED
AND
FILED

1996 MAY -1 PM 3: 20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **J43031 (0)**

1. Corporation Name
TOWERMARC CONSTRUCTION CORP.

Principal Place of Business Mailing Address
% DAVID G. MULOCK ONE HARBOUR PLACE TAMPA FL 33602
% DAVID G. MULOCK ONE HARBOUR PLACE TAMPA FL 33602

2. Principal Place of Business 2a. Mailing Address
21 c/o Towermarc Corp. 26 c/o Towermarc Corp.
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 260 Franklin Street 27 260 Franklin Street
City & State City & State
23 Boston, MA 02110 28 Boston, MA 02110
Zip Country Zip Country
24 02110 25 Country 29 02110 30 Country

3. Date Incorporated or Qualified 11/18/1986 3a. Date of Last Report 03/08/1995
4. FEI Number 58-1714461 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
PEEK, JR. S I
1511 N WESTSHORE BLVD., #1130
5TH FLOOR
TAMPA FL 33607
10. Name and Address of New Registered Agent
81 Name INTRASTATE REGISTERED AGENT CORPORATION
82 Street Address (P.O. Box Number is Not Acceptable) 701 Brickell Avenue, Suite 3000
83
84 City Miami FL 85 Zip Code 33131

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. **INTRASTATE REGISTERED AGENT CORPORATION**
By: *Morris H. Miller* **Morris H. Miller, Vice-President** DATE 4/30/96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DV <input checked="" type="checkbox"/> DELETE	1.1 TITLE	DV <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HARRIS, MICHAEL E.	1.2 NAME	D. Scott Ross
STREET ADDRESS	6410 POPLAR, STE 300	1.3 STREET ADDRESS	260 Franklin St., Ste. 1840
CITY-ST-ZIP	MEMPHIS TN	1.4 CITY-ST-ZIP	Boston, Ma. 02110
TITLE	CPD <input type="checkbox"/> DELETE	2.1 TITLE	DVST <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VINIADIS, POLYMIOS C.	2.2 NAME	Salvatore Campofranco
STREET ADDRESS	2 PICKWICK PLAZA, 4TH FLOOR	2.3 STREET ADDRESS	260 Franklin St., Ste. 1840
CITY-ST-ZIP	GREENWICH CT	2.4 CITY-ST-ZIP	Boston, Ma. 02110
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	300001803913
CITY-ST-ZIP		3.4 CITY-ST-ZIP	-05/01/96--01094--025
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	***200.00 ***200.00
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	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	<input type="checkbox"/> DELETE	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 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 if changed, or on an attachment with an address.

SIGNATURE x *D. Scott Ross* DATE 4/30/96
D. Scott Ross 617-439-9077

CR2E034 (12/95)