## 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 #

Principal Place of Business

J63773

(2)

MCDANIEL GRADING, INC.

Mailing Address

APPROVED
AND
FILED

96 JAN 23 MIND: 40
SECRETARY OF STATE
TAILAHASSEE. FLORIDA



428 5TH STREET ORLANDO FL 32824 US		428 5TH STREET ORLANDO FL 3282 US	ORLANDO FL 32824		Date Incorporated or Qualified	3a. Date of Las	st Recort	
					03/23/1987		0/1995	
2. Principal Pla	ice of Business	2a. Mailing Address			4. FEI Number		Applied For	
21		26			59-2802375	<u> </u>	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	28				Election Campaign Financing     Trust Fund Contribution	The second secon		
Ζφ [ <b>24</b> ]	Country <b>25</b>	7/p <b>29</b>	Cour 30	try	8. This corporation has liability for in Florida Statutes 🔀 Yes	ntangible tax unde		
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New R	egistered Agent		
				31 Name				
CARPENTER, CONNIE C 428 5TH STREET				Street Address (P.O. Box Number is Not Acceptable)				
ORLANDO FL 32824			1	33	-02/06/9601077012			
				34 City	****20	FI 85	#200,00 Zip Code	
	o the provisions of Sections 607.05 ad agent, or both, in the State of Fl a, and accept the obligations of, Si			e-named cor prporation's b	poration submits this statement for the purpopard of directors. I hereby accept the appo	pose of changing i pintment as registe	ts registered office red agent. I am	
SIGNATURE								
r	ilg lature, ty, aid or printed han e of registerest a		DTE: Registered A	gent signature re-	wired when reinstatingt	DATE		
12.	OFFICERS /	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFE	CERS AND DIREC	TORS IN 12	
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NAME.	MCDANIEL, RUSSELL 3191 MAGUIRE BLVD, SI	HTC 407	1.2 NAM					
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NAME	MCDANIEL, HAROLD	DELETE	2 1111			🔀 Chang	ge 🔲 Addition	
	3191 MAGUIRE BLVD., S	HTC 467	2 2 NAN		1/		İ	
STREET ADDRESS	ORLANDO FL	OHE 107		EET ADDRESS	428 5th STREGT	_		
CHY ST-ZIP	PDT	☐ DELETE		- \$1 - ZIP	ORLANDO, FC 3282			
NAME:	CARPENTER, CONNIE	□ DETEIE	3 1 1111	[		<b>™</b> Chang	ge Addition	
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SUBERT ADDRESS	3191 MAGUIRE BLVD., S	HTF 167	4.2 NAM					
CHTY - ST - ZIF	ORLANDO FL 32803	DITE 107		ET ADDRESS			i	
Title	STIME IT IN THE STATE OF THE ST	[] DELETE	4.4 DITY 5. 1 TITU	-ST-ZIP			no FT Addition	
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STREET ADDRESS				I .				
CITY-ST ZIF				ET ADDRESS	1-23-96 MSt			
11°LF		DELETE	5.4 CITY 6. 1 TITE		100 10 moi		A Desire	
NAME		T Decemb	6.2 NAM			Ctiang	e 🔲 Addition	
STREET ADDRESS							!	
CHY-ST-7IP				ET ADDRESS				
	certify that the information supplie	with this filing is valuatorily furn	64 CITY	-51-7IP	y for the exemption stated in Section 119.0			

orth, that I am an officer or director of the exposition or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further outh, that I am an officer or director of the exposition 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 chapter 6, or on an attaching with an address.

SIGNATURE:

LATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Onnie C Carponter, Pers. 1/17/46 407 856-1012