FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

i. Corporatio	IN CONSTRUCTION CO	OMPANY, INC. Mailing Addres 323 BOB WHITE	Mailing Address 323 BOB WHITE WAY SARASOTA FL 34236-1813			3. Date Incorporated or Qualified 3a. Date of Last Report		
						04/30/1987	04/17/1996	7,50.1
· ·	2. Principal Place of Business 21		2a. Mailing Address			4. FEI Number 59-2871364		plied For t Applicable
Suite, Apt.	#, etc.	Suite, Apt	Suite, Apt #, etc.			5. Certificate of Status Desired	□ \$8.75 A	Additional
City & Stat	A	City & State	City & State				Fee Rec	'
23	·	28				Election Campaign Financing Trust Fund Contribution	\$5.00 :	
Zip	Country	Zip	├─ ┐			8. This corporation has liability for		199.032,
24	25 29 30 30 9. Name and Address of Current Registered Agent			L		Florida Statutes 10. Name and Address of New F	Yes No	•
MCE	ARLIN, HENRY B.	An one neglection right		81	Name	IQ, Harrie and Address of Hour	ingistored right	
323 BOB WHITE WAY				82	Street Ad	dress (P.O. Box Number is Not Accept	able)	
SAR	ASOTA FL 34236							 ,
ļ				83				
				84	City		FL 85 Zip C	ode
I office or r	egistered agent, or both, in the m familiar with, and accept the Sgream type for promore or tregets	State of Florida Such cha obligations of, Section 60:	nge was auth 7.0505. Florida	orized by a Statutes gistered Age	the corpor	rporation submits this statement for the ation's board of directors. I hereby acc	ept the appointment as r	registered
12.		RS AND DIRECTORS	VI ETE	13.		ADDITIONS/CHANGES TO OFF		S IN 12 Addition
TITLE NAME	MORAPHIA LIPMBY B		1.1 TITLE 1.2 NAME	İ		Change	LJ AQUIDDIT	
STREET ADDRESS	323 BOB WHITE WAY			1.3 STREET	ADDRESS			
CITY-ST-7-P	SARASOTA FL			1.4 CITY - S	T - ZiP			
THILE	1		2.1 TITLE			Change	Addition	
NAME DIGGGT ADDRESS			2.2 NAME 2.3 STREET	+DDDCCC				
STREET ADORESS CITY-ST-2IP				2.3 STREET				
TITLE			DELETE	3.1 TITLE			Change	Addition
NAME				3 2 NAME				
STREET ADDRESS				33 STREET	l l			ļ
CITY-ST-ZIP	1 1 Addington to 1 and 1		DELFTE	3 4. CITY - 5 4 1 TITLE	ST - ZIP		☐ Change	Addition
NAME		٠ اسا	, E.F E	4 2 NAME			S.agv	
STREET ADDRESS				43 STREET	ADDRESS			
CITY - ST - ZIP				44 CHY-S	T- ZIP			
TITLE			DELETE	5.1 TITLE			☐ Change	Addition
NAME				5.2 NAME				
STREET ADDRESS				5.3 STREET	i			
CITY - ST - 71P			DELETE	5.4 CITY - S 6.1 TITLE	1- LIP		☐ Change	Addition
NAME				6.2 NAME				
STREET ADDRESS				6.3 STREET	ADDRESS			
CITY-ST-ZIP				6.4 CITY-S				

14. Loo 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.