

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

**FILED**  
**May 15 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION  
 ANNUAL REPORT  
**1997**



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

**DOCUMENT # J83151 (7)**  
 1. Corporation Name  
**BRICON CONSTRUCTION, INC.**



Principal Place of Business Mailing Address  
**C/O MASON H. GROWER, III** **C/O MASON H. GROWER, III**  
**111 N. ORANGE AVENUE, SUITE 1700** **111 N. ORANGE AVENUE, SUITE 1700**  
**ORLANDO FL 32801** **ORLANDO FL 32801-2399**

3. Date Incorporated or Qualified **07/17/1987** 3a. Date of Last Report **06/25/1996**  
 4. FEI Number **59-2822446** 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

2. Principal Place of Business 2a. Mailing Address  
 21 **390 North Orange Ave.** 26 **390 North Orange Ave.**  
 Suite, Apt. #, etc. Suite, Apt. #, etc.  
 22 **Suite 1900** 27 **Suite 1900**  
 City & State City & State  
 23 **Orlando, FL** 28 **Orlando, FL**  
 Zip Country Zip Country  
 24 **32801** 25 **Orange** 29 **32801** 30 **Orange**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GROWER, MASON H., III**  
**111 N. ORANGE AVENUE**  
**SUITE 1700**  
**ORLANDO FL 32801**

81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
**390 North Orange Ave., Suite 1900**  
 83  
 84 City **Orlando** FL 85 Zip Code **32801**

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]* **Feb 11, 1997**  
 Signature, typed or printed name of registered agent, and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
PD	BRICE, ALLYN S. 1813 ANTIGUA DR. ORLANDO FL	<input type="checkbox"/> DELETE	
V	BRICE, GINA M. 1813 ANTIGUA DR. ORLANDO FL	<input type="checkbox"/> DELETE	
VST	GROWER, MASON H., III 313 WINDCLIFFE CT. OVIEDO FL	<input type="checkbox"/> DELETE	
D	GROWER, MASON H., III 313 WINDCLIFFE CT. OVIEDO FL	<input type="checkbox"/> DELETE	
		<input type="checkbox"/> DELETE	
		<input type="checkbox"/> DELETE	

14. I do 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.

SIGNATURE: *[Signature]* **4/28/97** **1107 277-2688**

CR2E034 (9/96)