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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1/20/00

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1. Corporation Name UNITED ROAD BUILDERS, INC. Principal Place of Business 642 WOODHILL DRIVE LAKELAND FL 33813 Mailing Address 642 WOODHILL DRIVE LAKELAND FL 33813									
						3. Date Incorporated or Qualified 10/13/1988	3a. Date 0		port
	ace of Business	2a. Mailing Ad	Idress			4. FEI Number		App	olied For
Suite, Apt.	# reto	26 Suito Apt	Suite, Apt. #, etc			59-2918917			Applicable
22 Suile, Apr	#, etc.		27			5. Certificate of Status Desired		8.75 A. Fee Rec	
City & State)		City & State			6. Election Campaign Financing		\$5.00 h	·
23		28				Trust Fund Contribution Added to Fees			
Zip	Country	Zip		Country	i	6. This corporation has liability for			199.032,
24	9. Name and Address of Curre	29 nt Registered Agen		10		Florida Statutes 10. Name and Address of New R	Yes N		
MAG	NESS, BUDDY			81	Name				
4526 MAINE AVENUE				82	82 Street Address (P.O. Box Number is Not Acceptable)				
	LAND FL 33801		82 Street A			ess (1.0. Box Normber is Not Accepte			
				83					
				84	City		- E	35 Zip C	ode
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes,					a named same	ention as begins this atatament for the	FL	anging its	conintered
office or re agent. Lar	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida, Such ch gations of, Section 60	iange was au 07.0505. Flori	thorized by da Statutes	the corporati s.	ion's board of directors. I hereby acce	ept the appoint	ment as r	egistered egistered
SIGNATURE	Signature, typed of providingly of requirementary			D			DATE		
12.		ND DIRECTORS	(NOIE.	13.	eni signature requir	ed when reinstating) ADDITIONS/CHANGES TO OFFI		RECTORS	IN 12
TITLE	DP DELETE		DELETE	1.1 TITLE				Change	Addition
NAME	MAGNESS, BUDDY			1.2 NAMÉ					
STREET ADDRESS	4526 MAINE AVENUE			1.3 STREE1	ADDRESS				
CITY-ST-ZIP	LAKELAND FL			1.4 CITY - ST - ZIP					
TITLE	DST DELETE		2.1 TITLE				Change	Addition	
NAME	MAGNESS, HELEN A.			2.2 NAMÉ					
STREET ADDRESS	4526 MAINE AVENUE			2.3 STREET	ADDRESS				
CITY-ST-ZIP	LAKELAND FL		DELETE	2. 4 CITY-	ST-ZIP		·····	Change	Addition
TITLE	DV DELETE MAGNESS, DAVID A.		3.1 TITLE			لسا	Change	L.J AUGIGION	
NAME Protect Approace	4526 MAINE AVENUE			3.2 NAME 3.3 STREET	LADDRECC				
STREET ADDRESS CITY-S1-2IP	LAKELAND FL			3.5 STREET					
TITLE	Be M. Greek at A.D. A.		DELETE	4.1 TITLE	31-711			Change	Addition
NAME				4. 2 NAME	.]		_	-	
STREET ADORESS				4.3 STREET	r address				ļ
CITY-ST-ZIP				4.4 CITY-5					
TITLE			DELETE	5.1 TITLE				Change	Addition
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREE	T ADDRESS				
CITY+S1-ZIP			051.535	5.4 CITY - 5	ST-ZIP			1 n	F 1 3 . a
TITLE		LJ	DELETE	6 1 TITLE			لبا	Change	Addition
NAME				62 NAME					!
STREET ADDRESS				63 STREE	ADORESS				İ

6.4 CITY-ST-ZIP

14. If 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 of 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.

A. HAGNESS

FILED

Jan 17 1997 8:00am

Secretary of State