## FILE NOW: FILING FEE AFTER MAY 1 18 \$225.00

CORPORATION **ANNUAL REPORT** 



Sandra B. Montrers Secretary of State

•	1995	DIVISION	N OF COF	PORATION	SMS		·	
DOCIII	MENT # L16281	(2)		<del></del>		95 HAY -1 PH 2: 35	5	
1. Corporation	MENT # <b>L1628</b> 1	l (2)				OF OTATE		
TATE CONSTRUCTION COMPANY						SECRETARY OF STATE TALLAHASSEE, FLORIDA		
Principal Place	of Business	Mailing Address				7		
C/O MELVIN C TATE C/O MELVIN C TATE								
4187 DAIRY C PORT ORANG		4187 DAIRY COURT PORT ORANGE FL 32127			DO NOT WRITE IN THIS SPACE			
FOR ORANGE PE SELECT			OE1E1			3. Date Incorporated or Qualified	3s. Date of Last Report	
2 Principal Pl	ace of Business	2a. Mailing Address	·	<del></del>	· ···	09/13/1989 4. FEI Number	05/01/1994 Applied For	
21	200 01 012011030	26				59-2970738	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc	c.			5. Certificate of Status Desired	\$8.75 Additional	
City & State		City & State					Fee Required	
23	1	28				Bection Campaign Financing     Trust Fund Contribution	\$5.00 May Be  Added to Fees	
Ζp	Country	7:n		Country		8. This corporation has liability for	Intangible tax under S. 193.032,	
24	25	29	30	<u> </u>		Florida Statutes Yes		
	9. Name and Address of Curren	it Hogistered Agent		81	Name	10. Name and Address of New R	legistered Agent	
TATE, ME	ELVIN C.			82	Street Add	dress (P.O. Box Number is Not Acceptab	olo)	
325 WILDER BLVD.				Sileet Au	oress (r.o. box nomber is not acceptab			
#303-B DAYTONA BEACH FL 32114				83				
DATIONA	A BEAUTI PL 32114			84	City		FL 85 Zip Code	
11. Pursuant to	o the provisions of Sections 607.0502	and 607.1508, Florida St	tatutes, th	e above-r	named corp	oration submits this statement for the pur	pose of changing its registered office	
or registers	ed agent, or both, in the State of Flori h, and accept the obligations of, Sect	da. Such change was autl	narized by	the corp	oration's bo	ourd of directors. Thereby accept the appoint	ointment as registered agent. I am	
SIGNATURE .							DATE	
12.	Signature, hand or printed name of registered agent OFFICERS AN		MOIE HO	13.	t synature rectu	ADDITIONS/CHANGES TO OFF	<del></del>	
TITLE	PST			1 1 TITLE			Change Addition	
NAME	TATE, MELVIN C.			1 2 NAME				
STREET ADDRESS	325 WILDER BLVD. #303-B DAYTONA BEACH FL			13 STREET	1			
CITY SI ZIP	DATION DENOTITE			14 CITY S 21 TIFLE	I ZIP	·	Change Addition	
NAME			ï	2.2 NAME				
STREET ADDRESS			ŀ	2 3 STREET	ADORESS			
CITY-ST ZIP				24 CITY S	I - ZIP		Change Addition	
TITLE				31 FITLE 32 NAME			Claude Cayouton	
STREET ADDRESS				3.3 STREET	ADDRESS			
CITY ST ZIP				34 CITY S	T - ZIP			
TITLE				41 TITLE			Change Addition	
STREET ADDRESS				4.2 NAME 4.3 STREET	Annaree			
CITY-ST ZIP				4.4 CITY - S				
Title				5 1 Title			Change Addition	
NAME				5 2 NAME				
STREET ADDRESS				5.3 STREET	h			
CITY ST ZIP				54 CITY S	1 - ZIP		Change Addition	
HAVE				6 2 NAME			Z c m A - FT controls	
STRUCT ADDRESS				63 STREET	ADDRESS			
CITY ST ZIP				64 CHY S				
14. I do hereb	y certify that the information supplied:	with this filing is voluntarity	himished	l and dou	a not qualify	for the exemption stated in Section 119.	07(3)(k), Florida Statutes 1 further	

I do bereity 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 inducted on this annual report or supplemental annual report is true and accurate and that my signature shall have the same tegal effect as if made under aith, that I are 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 intrachment with an address.

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