

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # L90080

(7)

1. Corporation Name

BROWN & ROOT BUILDING COMPANY



Principal Place of Business

6830 142ND AVE NO
P.O. BOX 3
CLEARWATER FL 34620
US

Mailing Address

ATTN: TAX DEPT
PO BOX 3
HOUSTON TX 77001-0003
US

2. Principal Place of Business

21 Subc. Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Subc. Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and officer in above block

Signature, typed or printed name of new registered agent

DATE

12. OFFICERS AND DIRECTORS

TITLE	DPC	☐ DELETE
NAME	BAILEY, KENNETH	
STREET ADDRESS	TWO CORPORATE DR.	
CITY-STATE-ZIP	CLEARWATER FL	
TITLE	V	☐ DELETE
NAME	REICH, JOHN	
STREET ADDRESS	4100 CLINTON DR	
CITY-STATE-ZIP	HOUSTON TX	
TITLE	AT	☐ DELETE
NAME	LOCKWOOD, T W	
STREET ADDRESS	4100 CLINTON DR.	
CITY-STATE-ZIP	HOUSTON TX	
TITLE	D	☒ DELETE
NAME	ZERR, E M	
STREET ADDRESS	4100 CLINTON DR	
CITY-STATE-ZIP	HOUSTON TX	
TITLE	DC	☐ DELETE
NAME	ZANDER, S. A.	
STREET ADDRESS	4100 CLINTON DR.	
CITY-STATE-ZIP	HOUSTON TX	
TITLE	SVD	☐ DELETE
NAME	ROGERS, CHARLES	
STREET ADDRESS	4100 CLINTON DR.	
CITY-STATE-ZIP	HOUSTON TX	

13.

1. TITLE	
2. NAME	
3. STREET ADDRESS	
4. CITY-STATE-ZIP	
5. TITLE	
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60. CITY-STATE-ZIP	
61. TITLE	
62. NAME	
63. STREET ADDRESS	
64. CITY-STATE-ZIP	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

Director/Chair. of Board ☒ Change ☐ Addition
T. Smith, III

14. I do hereby 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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/96

713/676-3011
Daytime Phone

CR2E034 (12/95)