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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

M77492

(0)

NORTHWEST CONSTRUCTION OF PANAMA CITY, INC.

Principal Place of Business Mailing Address **5 MIRACLE STRIP LOOP 5 MIRACLE STRIP LOOP** DO NOT WRITE IN THIS SPACE PANAMA CITY BCH FL 32407 PANAMA CITY BCH FL 32407 3. Date Incorporated or Qualified 04/15/1988 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 26 59-2884730 Not Applicable Suite, Apt. #, etc. Suile, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Ζip Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. X Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name COVINGTON, HARVEY H. 1309 N STAR AVE 82 Street Address (P.O. Box Number is Not Acceptable) PANAMA CITY FL 32404 83 84 City 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typeo or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) CR2E034 (10/97 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 THLE COVINGTON, HARVEY H. COVINGTON, HARVEY H. NAME 1.2 NAME 1309 N STAR AVE STREET ADDRESS 5 MIRACLE STRIP LOOP, SUITE 16 1.3 STREET ADORESS PANAMA CITY FL CITY-ST-ZIP 1.4 C(TY - ST - 7)P PANAMA CITY BEACH, FL 32407 DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change ___ Addition TITLE 6.1 TITLE NAME 6.2 NAME

14. I 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 supplience all 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:

6.3 STREET ADDRESS

CIONATURE.

STREET ADDRESS

CITY-ST-ZIP

119 11 65

1/27/QQ (8x2)234-QNOL

FILED

May 01 1998 8:00am

Secretary of State