

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

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Apr 11 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P00318 (6)

1. Corporation Name
SOUTHERN GULF-WEST CONSTRUCTION, INC.



Principal Place of Business 4227 EXCHANGE AVE NAPLES FL 33942 US	Mailing Address 866 N MAIN P. O. BOX 100 MORTON IL 61550-0100 US
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country
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3. Date Incorporated or Qualified 12/14/1983	3a. Date of Last Report 04/26/1996
4. FEI Number 37-1104244	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

WISEMAN, JOHN
4227 EXCHANGE AVENUE
NAPLES FL 33942

10. Name and Address of New Registered Agent

81 Name **RAYMOND L. BASS, JR.**
82 Street Address (P.O. Box Number is Not Acceptable)
2335 Tamiami Trail N.
83 **Ste. 409**
84 City **Naples** FL 85 Zip Code **34103**

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 *Raymond L. Bass, Jr.* **RAYMOND L. BASS, JR.** DATE **April 4, 1997**

12. OFFICERS AND DIRECTORS

TITLE	CD	<input type="checkbox"/> DELETE
NAME	BAUM, WAYNE E.	
STREET ADDRESS	866 N. MAIN	
CITY-ST-ZIP	MORTON IL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	SULLIVAN, GLEN D.	
STREET ADDRESS	866 N. MAIN	
CITY-ST-ZIP	MORTON IL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	ROESCHLEY, STEPHEN R.	
STREET ADDRESS	866 N. MAIN	
CITY-ST-ZIP	MORTON IL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BAUM, KENNETH D.	
STREET ADDRESS	866 N. MAIN	
CITY-ST-ZIP	MORTON IL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BAUM, ROBERT L.	
STREET ADDRESS	866 N. MAIN	
CITY-ST-ZIP	MORTON IL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	GURDIAN, ROBERT J.	
STREET ADDRESS	4227 EXCHANGE AVE	
CITY-ST-ZIP	NAPLES FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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: *Robert J. Gurdian* **SIGNATURE REQUIRED** 3/22/97 (941) 643-6677

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)

Southern Gulf-West Construction, Inc.
Additional Officers and Directors

7.1 TITLE	P
7.2 NAME	Wiseman, John P.
7.3 STREET ADDRESS	4227 Exchange Ave.
7.4 CITY, STATE, ZIP	Naples, Florida 33942

The above officer was also listed on the 1996 Annual Report.

8.1 TITLE	VD
8.2 NAME	Baum, Melvin
8.3 STREET ADDRESS	866 N. Main
8.4 CITY, STATE, ZIP	Morton, Illinois 61550

The above officer was also listed on the 1996 Annual Report.

9.1 TITLE	V
9.2 NAME	Wallenfang, Thomas
9.3 STREET ADDRESS	4227 Exchange Ave.
9.4 CITY, STATE, ZIP	Naples, Florida 33942

The above officer was not listed on the 1996 Annual Report.

10.1 TITLE	V
10.2 NAME	Baum, Robert J.
10.3 STREET ADDRESS	4227 Exchange Ave.
10.4 CITY, STATE, ZIP	Naples, Florida 33942

The above officer was not listed on the 1996 Annual Report.