

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

FILED

Jan 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P01939** (8)

1. Corporation Name
W.J. WOODWARD CONSTRUCTION, INC.

Principal Place of Business MILTON INDUSTRIAL PARK ROUTE 9W MILTON NY 12547	Mailing Address MILTON INDUSTRIAL PARK ROUTE 9W MILTON NY 12547
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/09/1984	Applied For <input type="checkbox"/> Not Applicable
4. FEI Number 14-1556528	
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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent
**BALDWIN, RALPH V. (JR.)
6890 CAMBRIDGE PLACE
FT. MYERS FL 33907**

10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Ralph V. Baldwin Jr.* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	WOODWARD, WILLIAM J.	1.2 NAME	
STREET ADDRESS	164 SOUTH ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	MARLBORO NY	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	
NAME	WOODWARD, KELLY-JEAN	2.2 NAME	
STREET ADDRESS	164 SOUTH ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	MARLBORO NY	2.4 CITY-ST-ZIP	
TITLE	STD	3.1 TITLE	
NAME	WOODWARD, JEAN K.	3.2 NAME	
STREET ADDRESS	164 SOUTH ST	3.3 STREET ADDRESS	
CITY-ST-ZIP	MARLBORO NY	3.4 CITY-ST-ZIP	
TITLE	EVD	4.1 TITLE	
NAME	COUPART, THOMAS T.	4.2 NAME	
STREET ADDRESS	BX 293A LATTITOWN RD.	4.3 STREET ADDRESS	
CITY-ST-ZIP	MARLBORO, NY.	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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: *William J. Woodward*

1/6/98

CR2E034 (10/97)