FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham

ANNUAL REPORT

1998

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P03044

CAROTHERS CONSTRUCTION, INC.

(5)

FILED Jan 28 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address				<u> </u>	
HWY 7 SOUTH HWY 7 SOUTH				1		
PO DRAWER 687 PO DRAWER 687						
WATER VALLEY MS 38965-0687 WATER VALLEY MS 38965-0687				DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified 08/15/1984		
Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For	
21	26			64-0440391	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional	
2 27				3. Certificate of diatus besifed	Fee Required	
City & State				6. Election Campaign Financing	\$5.00 May Be	
23	28			Trust Fund Contribution	Added to Fees	
Zip Country	Zip	<u> </u>		8. This corporation owes or has paid the d		
24 25 9, Name and Address of Current	29	30		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent		
	negistered Agent	5	1 Name	10. Name and Address of New Registere	u Agent	
CT CORPORATION SYSTEM			1 Name			
1200 S. Pine Island Road Plantation FL 33324			2 Street Addr	et Address (P.O. Box Number is Not Acceptable)		
		Ε	3			
		Ε	4 City	F	85 Zip Code	
dd Diversal Ia the are verse of Costione 607 0500	and CO7 1500 Florida Ctatu	too the ob-	us semad sera			
 Pursuant to the provisions of Sections 607,0502 office or registered agent, or both, in the State o agent. I am familiar with, and accept the obligat 	f Florida. Such change was ons of, Section 607.0505, Fl	authorized lorida Statu	by the corporaties.	ion's board of directors. I hereby accept the ap	opointment as registered	
SIGNATURE						
Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered			gent signature require		10 010507000 IV 40	
	OFFICERS AND DIRECTORS 13.			ADDITIONS/CHANGES TO OFFICERS AI	Change Addition	
CAROTUEDO ADMOLD	T DETEL	1,1 TITL			L. Gliange L. Addition	
LIMV 7 C DO DOMMED 607		1,2 NAM				
MATED VALLEY MO			ET ADDRESS		!	
G11-21-24	1,4 (4)		-ST-ZIP		Change Addition	
CHADD CATHY A	IADD CATILY A				Cit cuttings CT vocation	
DT + DOV 227 C		2.2 NAM				
WATER VALLEY ME			ET ADDRESS			
GL11-31-2IF	☐ DELETE	2, 4 GITS 3,1 TITL	'-ST-ZIP		Change Addition	
CADOTHEDO CEAN D	OLDOWIEDO OFILI D		l l		☐ Ghange ☐ Addition	
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MATED VALLEY ME			ET ADDRESS			
CITY-ST-ZIP WATER VALLET WIS	DELETE	3.4. CITY 4.1 TITLE	-ST-ZIP		Change Addition	
					Griange Addition	
NAME		4. 2 NAN	l l			
STREET ADDRESS			ET ADDRESS			
CITY-ST-ZIP TITLE	DELETE	4.4 CITY 5.1 TITLE			Change Addition	
	Decere		i		C orienta C Magnin	
NAME		5.2 NAM	1			
STREET ADDRESS		i i	ET ADDRESS		ļ	
CITY - SI - ZIP	☐ DELETE	5.4 CITY			Change Addition	
THE	<i>0::::::</i>	6.1 TITLE 6.2 NAM			Ondigo Addition	
NAME GYDTET ADDOCCO		■ D / NAM	· I			
					1	
STREET ADDRESS CITY-ST-ZIP			ET ADDRESS			

ordicated 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.

1/13/198 601-473-2525