

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P14980 (7)

1. Corporation Name

R. D. VAUGHN CONSTRUCTION CO., INC.

Principal Place of Business

2478 COMMERCIAL PARK DRIVE
MOBILE AL 36606-2001

Mailing Address

2478 COMMERCIAL PARK DR., PO BOX 9463
MOBILE AL 36691
US



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

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28

Zip

Country

Zip

Country

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25

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30

9. Name and Address of Current Registered Agent

BEALL, PHILIP D.
111 SOUTH SPRING STREET
PENSACOLA FL 32501

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 607.0802 and 607.1503, 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 607.0806, Florida Statutes.

SIGNATURE

Signature of the Agent for the corporation

Signature of the Agent for the corporation

Signature of the Agent for the corporation

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY- ST- ZIP
PD	VAUGHN, R.D.	1111 SAVANNAH ST.	MOBILE AL
SD	VAUGHN, SANDRA K.	1111 SAVANNAH ST	MOBILE AL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	Change	Addition
1. TITLE		
2. NAME		
3. STREET ADDRESS		
4. CITY- ST- ZIP		
5. TITLE		
6. NAME		
7. STREET ADDRESS		
8. CITY- ST- ZIP		
9. TITLE		
10. NAME		
11. STREET ADDRESS		
12. CITY- ST- ZIP		
13. TITLE		
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15. STREET ADDRESS		
16. CITY- ST- ZIP		
17. TITLE		
18. NAME		
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22. NAME		
23. STREET ADDRESS		
24. CITY- ST- ZIP		
25. TITLE		
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27. STREET ADDRESS		
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32. CITY- ST- ZIP		
33. TITLE		
34. NAME		
35. STREET ADDRESS		
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45. TITLE		
46. NAME		
47. STREET ADDRESS		
48. CITY- ST- ZIP		
49. TITLE		
50. NAME		
51. STREET ADDRESS		
52. CITY- ST- ZIP		
53. TITLE		
54. NAME		
55. STREET ADDRESS		
56. CITY- ST- ZIP		
57. TITLE		
58. NAME		
59. STREET ADDRESS		
60. CITY- ST- ZIP		

14. I do hereby certify that the information supplied with this filing is accurate and does not qualify for the exemption stated in Section 119.073(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or biennial report is true and a guarantee of 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 attached sheet with an addendum.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
R. D. Vaughn, President

3/5/96 334-475-9576

CR2E034 (12/95)