

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P16445** (9)

1. Corporation Name

R.C. CONSTRUCTION CO., INC. OF MISSISSIPPI

Principal Place of Business

**311 WEST PARK AVENUE
GREENWOOD MS 38930**

Mailing Address

**311 WEST PARK AVENUE
GREENWOOD MS 38930**



2. Principal Place of Business

2a. Mailing Address

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Sub: Apt. #, etc.

Sub: Apt. #, etc.

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City & State

City & State

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Zip

Country

Zip

Country

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9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

3. Date Incorporated or Qualified

10/20/1987

3a. Date of Last Report

02/10/1995

4. FET Number

59-2667481

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

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 607.0502 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Sections 607.0503, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Secretary of Corporation)

(Signature of Registered Agent or Secretary of Corporation)

DATE

12. OFFICERS AND DIRECTORS

FILE
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CITY, ST, ZIP
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**PD
POWERS, CHARLES M.
104 RIVERSIDE DRIVE
GREENWOOD MS
VD
POWERS, JOHN H.
206 WEST HARDING AVENUE
GREENWOOD MS
S
FRATESI, KAREN H.
314 WEST ADAMS AVENUE
GREENWOOD MS**

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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98. NAME
99. STREET ADDRESS
100. CITY, ST, ZIP

☐ Change ☐ Addition

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14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 person 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 or changed or originally formed with an address.

SIGNATURE: *Karen H. Fratesi*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/16/96 (601) 453-2424
DATE DAYTIME PHONE

CR2E034 (12/95)