

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

FILED
Jun 18 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 # P18057 (0)

1. Corporation Name
L.M. BENAVIDEZ CONSTRUCTION, INC.



Principal Place of Business P.O. BOX 1077 LEAGUE CITY TX 77573	Mailing Address P.O. BOX 1077 LEAGUE CITY TX 77574-1077
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2. Principal Place of Business 21 5418 Bramble Lane Suite, Apt #, etc.	2a. Mailing Address 26 Suite, Apt #, etc.	3. Date incorporated or Qualified 02/17/1988	3a. Date of Last Report 07/01/1996
22 City & State 23 Dickinson, TX	27 City & State	4. FET Number 76-0129060	Applied For Not Applicable
24 Zip 77539	25 Country Galveston	29 Zip	30 Country
9. Name and Address of Current Registered Agent C T COPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		10. Name and Address of New Registered Agent 81 Name Jack E. Seelig 82 Street Address (P.O. Box Number is Not Acceptable) Route 1 Box 1114A 83 84 City Starke FL 85 Zip Code 32091	

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

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

I, 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 607.0605, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature, required when re-registering) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVIDSON, JAMES N	1.2 NAME	
STREET ADDRESS	5418 BRAMBLE LANE	1.3 STREET ADDRESS	
CITY-ST-ZIP	DICKINSON TX 77539	1.4 CITY-ST-ZIP	
TITLE	SD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVIDSON, JOHN B	2.2 NAME	
STREET ADDRESS	3156 RICHARDS DRIVE	2.3 STREET ADDRESS	John B. Davidson
CITY-ST-ZIP	DICKINSON TX 77539	2.4 CITY-ST-ZIP	3156 Richards Drive Dickinson, TX 77539
TITLE	TD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SEELING, JACK E	3.2 NAME	
STREET ADDRESS	ROUTE 1 BOX 1114-A	3.3 STREET ADDRESS	
CITY-ST-ZIP	STARKE FL 32091	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 _____ Secretary John B. Davidson (813) 237-1011 5/30/97

CR2E034 (9/96)