


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

FILED
Feb 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P33259 (3) 1. Corporation Name MALER CONSTRUCTION ASSOCIATES, INC.					
Principal Place of Business 299 SOUTH WALNUT BEND STE 101 MEMPHIS TN 38018 US			Mailing Address 299 SOUTH WALNUT BEND SUITE #101 MEMPHIS TN 38018 US		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/22/1991	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 62-1446737	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	Yes No
9. Name and Address of Current Registered Agent MALER, GEORGE 195 WESTWOOD CIRCLE EAST WEST PALM BEACH FL 33411				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 _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PC	DELETE	1.1 TITLE	Change Addition	
NAME	MALER, ROGER J.		1.2 NAME		
STREET ADDRESS	8818 EDENFIELD COVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	GERMANTOWN TN		1.4 CITY-ST-ZIP		
TITLE	VDV	DELETE	2.1 TITLE	Change Addition	
NAME	GILLULY, GREG		2.2 NAME		
STREET ADDRESS	595 SANGA CIRCLE		2.3 STREET ADDRESS		
CITY-ST-ZIP	CORDOVA TN 38018		2.4 CITY-ST-ZIP		
TITLE	ST	DELETE	3.1 TITLE	Change Addition	
NAME	GILLULY, GREG		3.2 NAME		
STREET ADDRESS	595 SANGA CIRCLE		3.3 STREET ADDRESS		
CITY-ST-ZIP	CORDOVA TN 38018		3.4 CITY-ST-ZIP		
TITLE	T	DELETE	4.1 TITLE	Change Addition	
NAME	MALER, TRACIE		4.2 NAME		
STREET ADDRESS	8818 EDENFIELD COVE		4.3 STREET ADDRESS		
CITY-ST-ZIP	GERMANTOWN TN 38138		4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE	Change Addition	
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE	Change Addition	
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 _____

CR2E034 (10/97)