

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

PROFIT CORPORATION  
ANNUAL REPORT  
**1996**



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

**DOCUMENT # P40871 (6)**  
1. Corporation Name  
**J. MICHAELS CONSTRUCTION CO.**



Principal Place of Business: **2100 RIVERSIDE PKWY. SUITE 116 LAWRENCEVILLE GA 30243**  
Mailing Address: **2100 RIVERSIDE PKWY. SUITE 116 LAWRENCEVILLE GA 30243**

3. Date Incorporated or Qualified: **10/01/1992**  
3a. Date of Last Report: **12/18/1995**  
4. FEI Number: **65-0389103**  
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

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-29) fields with sub-headers for Suite, Apt. #, etc., City & State, Zip, and Country.

**9. Name and Address of Current Registered Agent**

**10. Name and Address of New Registered Agent**

**STOPS, J. MICHAEL  
830 ROBERT ROAD  
TITUSVILLE FL 32780**

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 607.0602 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 and is 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: *Jon Michael Stops, President* DATE: **7/23/96**

**12. OFFICERS AND DIRECTORS**

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

TITLE	<b>DST</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>CARLL, DONALD R.</b>	
STREET ADDRESS	<b>2600 PLEASANTDALE RD.</b>	
CITY-ST-ZIP	<b>DORAVILLE GA</b>	
TITLE	<b>DP</b>	<input type="checkbox"/> DELETE
NAME	<b>STOPS, J. MICHAELS</b>	
STREET ADDRESS	<b>2100 RIVERSIDE PKWY.</b>	
CITY-ST-ZIP	<b>LAWRENCEVILLE GA 30243</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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)(k), 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, checked, or in an attachment with an address.

SIGNATURE: *Jon Michael Stops* **Jon Michael Stops, President** DATE: **7/23/96** 770-962-3333

CR2E034 (12/95)