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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	996	DIVISIO	N OF CORI	PORATIC				
DOCUM 1. Corporation	MENT # P930	00017888	(7)					
	LE CONTRACTORS OF	ALABAMA, INC.						
11.14. 1		Committee of the commit						
Principal Place of	of Business	Mailing Address				1 10014001 110 10100 11111 \$821 001	DI MBINI BANDE NIBIN II	48 61 18161 18181 1811 1881
2375 WEST HERMAN STREET PENSACOLA FL 32505		2375 WEST HERMAN STREET PENSACOLA FL 32505						
FENSAUULA	FL 32300	LHONOGENTE	******			3. Date Incorporated or Qualified 03/05/1993	3a. Date of 05/0	Last Report)1/1995
2. Principal Pla	ce of Business	2a. Mailing Addres	s			4. FEI Number		Applied For
1	•••	26			59-3170791		Not Applicable	
Suite, Apt. #	, etc.	Suite, Apt. #, e	tc.		-	5. Certificate of Status Desired		8.75 Additional Fee Required
City & State		City & State				6. Election Campaign Financing		\$5.00 May Be
23		28				Trust Fund Contribution		Added to Fees
Z(p 24	Country 25	Z _I p		Country 30			s 🔲 No	
	9. Name and Address of Cu					10. Name and Address of New	Registered Ag	ent
				81	Name			
THOMAS	THOMAS, TYLER JOHN 82 Street Ack					ress (P.O. Box Number is Not Accepta	ible)	
6045 S GULG MANOR								
PENSAC	OLA FL 32508			83				
				84	City			85 Zip Code
					1		<u> </u>	
or registers	o the provisions of Sections 607.0 ed agent, or both, in the State of I h, and accept the obligations of S	-lorida. Such change was at	ithorized by	e above- the corp	named corpo poration's boa	oration submits this statement for the pard of directors. I hereby accept the ap	urpose or charg pointment as reg	gistered agent. I am
SIGNATURE _	Signa ure, typed or printed name of registered	annot and title if applicable	(NOTE: Rec	a stered Acc	nt signature requir	ed when reinstating)	DATE	
12.		AND DIRECTORS	, , , , , , , , , , , , , , , , , , ,	13.		ADDITIONS/CHANGES TO OF	FICERS AND D	RECTORS IN 12
TITLE	D	☐ DELET	E	1. 1 TITLE				Change
NAME	TYLER, JOHN T			1.2 NAME				
STHEFT ADDRESS 2375 WEST HERMAN STREE		REET	Γ v		T ADDRESS			
CITY - ST - ZIP	PENSACOLA FL 32505			1.4 CITY-ST-ZIP				
TITLE		DELET	E	2 1 TITLE				Change Addition
NAME				2 2 NAME				
STREET ADDRESS				2.3 STREE	T ADDRESS			
CITY-ST-ZIP				2.4 CITY-	ST-ZIP			
TITLE		☐ DELET	Έ	3. 1 TITLE				Change Addition
NAME				3 2 NAME				
STREET ADDRESS				3.3. STREE	ET ADDRESS			
CITY-ST-ZIP				3 4 C(TY-				Ohana D Addition
TITLE		☐ DELET	E	4 1 TITLE			IJ	Change
NAME				4 2 NAME				
STREET ADDRESS				4 3 STREE	T ADDRESS			
CITY-ST-ZIP				4.4 CITY-				Change (T) 1229'
THTLE		☐ DELE	E	5 1 TITLE	1		L	Change
NAME				5.2 NAME				
STREET ADDRESS				5.3 STREE	T ADDRESS			

CITY-S1-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 if changed, or on an attachment with an address

5.4 CITY - ST - ZIP

63 STREET ADDRESS

6 1 TITLE

62 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

THLE

NAME

Tylu John Thomas Tyler

DELETE

4/23/96

904-432-3405 Destine Phone #

Change

☐ Addition