SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT
1996

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

FILED
97 AUG 22 PM 4:09
SECRETARY OF STATE
TALLAHASSEE FLORIDA

REINSTATEMENT 96-97 00

DOCUMENT # **P93000024135 (4)**

1. Corporation Name
FLORIDA STATEWIDE CONSTRUCTION, INC.

Principal Place of Business	Mailing Address
~~5055 SAN JUAN AVE~~ JACKSONVILLE FL 32210~~3246~~	~~5055 SAN JUAN AVE~~ JACKSONVILLE FL 32210~~3246~~

3. Date Incorporated or Qualified: 03/29/1993
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business
21: 6204 RANDIA DRIVE
22: Suite, Apt. #, etc. JACKSONVILLE, FLORIDA
23: City & State
24: Zip 32210 — 25: Country USA

2a. Mailing Address
26: 6204 RANDIA DRIVE
27: Suite, Apt. #, etc
28: City & State JACKSONVILLE, FLORIDA
29: Zip 32210 — 30: Country USA

4. FEI Number: 59-3174016 ☐ 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

9. Name and Address of Current Registered Agent
WELCH, SANDRA F
5055 SAN JUAN AVE
JACKSONVILLE FL 32210-3246

10. Name and Address of New Registered Agent
81 Name: Charles R. Welch
82 Street Address (P.O. Box Number is Not Acceptable): 6204 RANDIA Drive
83:
84 City: Jacksonville FL 85 Zip Code: 32210

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: Charles R Welch, Charles R. Welch, President
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D WELCH, SANDRA F 5055 SAN JUAN AVE JACKSONVILLE FL 32210-3246	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	P Charles R. Welch 6204 RANDIA Drive Jacksonville, FL 32210
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CEO WELCH, CHARLES R 5055 SAN JUAN AVE. JACKSONVILLE FL 32210-3246	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	400002276674--1 -08/25/97--01163--012 ****923.75 ****923.75
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	

CR2E034 (3/96)

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Charles R Welch — Aug 10, 1997 — (904) 771-2263
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #