

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

**FILED**  
**May 08 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE Sandra B. Matham Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P93000043400 (9)**

1. Corporation Name  
**K.R.C. CONSTRUCTION, INC.**



Principal Place of Business <b>115 CAMDEN ROAD                  PENSACOLA FL 32534</b>	Mailing Address <b>115 CAMDEN ROAD                  PENSACOLA FL 32534-3115</b>
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3. Date Incorporated or Qualified <b>06/10/1993</b>	3a. Date of Last Report <b>04/05/1996</b>
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2. Principal Place of Business 21. Suite, Apt. #, etc. 22. City & State 23. Zip 24. Country	2a. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. Zip 29. Country	4. FEI Number <b>59-3190113</b>	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**COOK, KAY R  
 115 CAMDEN ROAD  
 PENSACOLA FL 32534**

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 <b>FL</b>
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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: Kay R Cook DATE: 4-14-97

12. OFFICERS AND DIRECTORS

TITLE	D VICE-PRESIDENT	<input type="checkbox"/> DELETE	NAME	LARSEN, DON R
STREET ADDRESS	5806 MARGARETTA BLVD		CITY - ST - ZIP	PENSACOLA FL
TITLE	D PRESIDENT	<input type="checkbox"/> DELETE	NAME	COOK, WILLIS M III
STREET ADDRESS	415-B HANNAH ST		CITY - ST - ZIP	PENSACOLA FL
TITLE	D SEC/TREASURER	<input checked="" type="checkbox"/> DELETE	NAME	TUMMLER, ROY R
STREET ADDRESS	4506 DEAUVILLE WAY		CITY - ST - ZIP	PENSACOLA FL
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	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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	SEC/TREASURER	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
3.2 NAME	KELVIN PELFREY		
3.3 STREET ADDRESS	927 KATHLEEN AVENUE		
3.4 CITY - ST - ZIP	CANTONMENT, FL 32533		
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 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: Don R. Larsen DATE: 4-14-97 (904) 477-2025

CR2E034 (9/96)