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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P93000073668 (4)

COGGIN CONSTRUCTION & DEVELOPMENT. INC.

Principal Place of Business Mailing Address 691 7TH ST CHIPLEY FL 32428 CHIPLEY FL 32428-0516 3. Date Incorporated or Qualified 3a. Date of Last Report 10/25/1993 03/04/1996 2. Principal Place of Business 2s. Mailing Address 4. FEI Number Applied For 21 65-0445979 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country Country Zin 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 COGGIN, M R JR 808-E-JACKSON AVE 82 CHIPLEY FL 32428 **R3** 84 City 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 agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title diapplycal or (NCTL_thegistered Agent signature required when resestating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) TITLE DELETE 1.**1** 7 HLE Change ___ Addition COGGIN, COGGIN, M R JR NAME 1.2 NAME 308 E JACKSON AVE STREET ADDRESS 1.3 STREET ADURESS CHIPLEY FL 32428 CITY-ST-ZIP 1.4 CHY - \$1-7IP DELETE TITLE 2.1 TITLE Change Addition NAME WILSON, JIMMY O 2.2 NAME STREET ADDRESS 703 SOUTH BLVD EAST 2.3 STREET ADDRESS CITY-ST-ZIP CHIPLEY FL TITLE DELETE 3.1 11111 Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP TITLE DELETE 4.1 THE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIF 4.4 GITY - ST- ZIP DELETE TITLE 5.1 TITLE Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ACORESS CITY - ST- ZIP 5.4 CITY - ST - ZIP TITLE DELETE 61 TITLE ___ Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZiP 6.4 C+TY - S1 - 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 each; 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.

CICNIATURE.

228/24/1 me

4-20-97 204-128-274

FILED

May 07 1997 8:00am

Secretary of State