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.)

CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

OCUMENT #	P94000023912	(6)
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G. GIFFORD CONSTRUCTION CO.

r microal riade of basiless	
Principal Place of Business Mailing Addr	ess



NAPLES FL 33964		NAPLES FL 33964								
						3. Date Incorporated or Qualified 03/24/1994	e of Last Report 10/1995			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	J ,			ied For
1		26				65-0474654			\rightarrow	Applicable.
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			. 75 Ade ee Requ	
City & State	9	City & State		•		Election Campaign Financing Trust Fund Contribution			5.00 м dded to	•
Zip	Country	Zip	Cou	ntry		8. This corporation has liability for it	ntangible t	ax un	der s. 19	99 032
	25	29	30			Florida Statutes	Yes 🔀			
	9. Name and Address of Curr	ent Registered Agent				10. Name and Address of New Reg	istered A	gent		
OIF.	TARR AREARN I			81	Name					
	FORD, GREGORY L			82	Street Addr	ress (P.O. Box Number is Not Acceptable	e)			
	'1 23RD STREET SW PLES FL 33964				Direct Addi	Cos (i.e. post removal recognition	~ <i>,</i>			
NA	rleg fl 33904			83						
				84	City			85	Zip Co	ode:
							FL			
office or r	egistered agent, or both, in the Sta m familiar with, and accept the obl	te of Florida Such change was igations of, Section 607.0505, F	authorized Iorioa Statu	l by utes	the corporation	oration submits this statement for the pu on's board of directors. Thereby accept	the appoir	itmen	t as regi	stered
	Signature typica or printed career of registered			1 Age	na signature requit	rect when reinstating) ADDITIONS/CHANGES TO OFFICE	DALI COC ANIES	PVIDE	CTORS	IN 12
12.	I—————————————————————————————————————	AND DIRECTORS DELETE	13.	TI E		ADDITIONS/CHANGES TO OFFIC	EUS VIND		lange	Addition
TITLE	D	L Decerte					L		~ ig / _	
NAME	GIFFORD, GREGORY L		12 N		ADDRESS					
STREET ADDRESS	1771 23RD STREET SW				1					
CITY-ST-ZIP TITLE	NAPLES FL 33964	DELETE	2111		ST - ZIP		Τ	Cr	nange	Addition
NAME			2 2 N				_	_		_
STREET ADDRESS					I ADDRESS					
CITY-ST-ZIP			- 1		ST-ZIF					
TITLE		DELETE	3 t Ti					Ct	nange	Addition
NAME			3 2 N	AME						
STREET ADDRESS			335	TREET	T ADDRESS					
CITY - ST - ZIP			340	HY-:	SI - ZiP					
TITLE		DELETE	4 1 Ti	11.6] C	nange [Addition
NAME			4 2 N	IAME						
STREET ADDRESS			438	TREET	T ADDRESS					
CITY - ST - ZIP			4 4 C	ITY - 5	\$1 - ZIP				····	 -
TITLE		DELETE	5 1 TI	ITLE			L		nange	Addition
NAME			5 2 N	AME						
STREET ADDRESS			538	TREE.I	I ADOPESS					
CITY-ST-7iP					ST - Z1P					
TITLE		DELFTE	61T				L	C1	hange	Add-tion
NAME			62 N	AME						
STREET ADDRESS			638	TREE	T ADDRESS					
CITY OF 7ID	1		640	oTY - 5	ST-71P					

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). Flor da Statutes 1 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 19 or Block 13 if changed, or on an adaptment with an address.

SIGNATURE:

G OFFICER OR DIRECTOR