

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **P94000032337 (5)**

1. Corporation Name

**ALL CONSTRUCTION TRADES, INC.**



Principal Place of Business

**11990 N. LOGAN POINT  
DUNNELLON FL 34434**

Mailing Address

**11990 N. LOGAN POINT  
DUNNELLON FL 34434**

2. Principal Place of Business

21 | Suite, Apt. #, etc.

22 | City & State

23 | Zip Country

24 | 25

2a. Mailing Address

26 | Suite, Apt. #, etc.

27 | City & State

28 | Zip Country

29 | 30

9. Name and Address of Current Registered Agent

**MILLS, JAMES W  
6995 S.W. 204 AVE.  
DUNNELLON FL 34430**

3. Date Incorporated or Qualified  
**04/28/1994**

3a. Date of Last Report  
**09/29/1995**

4. FEI Number  
**59-3241026**

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

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

Signature type: corporation (check one) (Type and title in parentheses)

(If the Registered Agent signature is required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TYPE	NAME	STREET ADDRESS	CITY-ST-ZIP
P	MILLS, HERMAN L	10065 N. LINDON DR.	CITRUS SPRINGS FL 34434
V	MILLS, RICHARD W	1655 W. ST. ELIZABETH PL.	CITRUS SPRINGS FL 34434
S	MILLS, JAMES W	6995 S.W. 204TH AVE.	DUNNELLON FL 34430

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY-ST-ZIP
1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-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 Book 12 or Book 13 if changed, or on an attachment with an address.

SIGNATURE:

*James W. Mills* James W. Mills  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sec. 1/19/96 904-419-9883  
Date Daytime Phone #

CR2E034 (12/95)