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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 P94000035874 (4) DOCUMENT #

1. Corporation Name

CUNNINGHAM GENERAL CONTRACTORS, INC. Mailing Address Principal Place of Business 5620 S. BURKETT LAKE LANE 5620 S. BURKETT LAKE LANE WINTER PARK FL 32792 WINTER PARK FL 32792 3. Date incorporated or Qualified 3a. Date of Last Report 08/14/1995 05/09/1994 Applied For 2a. Mailing Address 2. Principal Place of Business 59-3240254 Not Applicable 21 26 \$8.75 Additional Suite Ant. #. etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 6. Election Campaign Financing \$5.00 May Be City & State City & State Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability for intangible tax under s 199.032, Country Zφ Country X Yes □ No Florida Statutes 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) **CUNNINGHAM, ALICE** 82 5620 S. BURKETT LAKE LANE В3 WINTER PARK FL 32792 85 Zip Code 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 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 (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Change Addition DELETE 1. 1 TITLE TITLE 1.2 NAME CUNNINGHAM, ALICE NAME 5620 S. BURKETT LAKE LANE 1.3 STREET ADDRESS STREET ADDRESS WINTER PARK FL 32792 1.4 CiTY-ST-7/P CITY - ST - ZIP Addition Change DELETE 2 1 THLE TITLE 2.2 NAME NAM: 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY - ST - ZIP CITY-ST-ZIP [] Change Addition | DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3. STREET ADDRESS STREET ADDRESS 34 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 4. 1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS

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 Block 12 or Block 13 if changed, or on an alternative with an address.

4.4 CITY - ST - 7IP

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5.4 C(1Y - ST-Z(P

64 CHY-ST-ZIP

5 1 TITLE

5.2 NAME

6 1 TITLE

6.2 NAME 6.3 STREET ADDRESS

CITY - ST- ZIP

STREET ADDRESS

STREET ADDRESS

CITY-S1-ZIP

TITLE

NAME

TITLE NAME

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

T DELETE

DELETE

Change

Change

Addition

Addition

CR2E034 (12/95)