

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

**APPROVED  
AND  
FILED**

**CORPORATION**  
ANNUAL REPORT  
**1995**



FLORIDA DEPARTMENT OF STATE  
Sandra H. Mathan  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P94000037671 (2)**  
1. Corporation Name  
**TRAY-CON CONSTRUCTION, INC.**

95 MAY -1 AM 9:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business / Mailing Address  
**7952 PINE GLEN COURT  
SARASOTA FL 34238**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **05/16/1994** 3a. Date of Last Report  
4. FEI Number **65-0499158** 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**  
7. This corporation has liability for intangible tax under 5 199 032, Florida Statutes  Yes  No

2. Principal Place of Business / Mailing Address  
21 **4616 Vintage Dr** 26 **4616 Vintage Dr.**  
State, Apt. #, etc. State, Apt. #, etc.  
22 City & State **Sarasota, FL** 27 City & State **Sarasota, FL**  
23 **34243** 24 **34243** 25 **FL** 28 **34243** 29 **FL** 30 **FL**

9. Name and Address of Current Registered Agent  
**HARRISON, TRACY  
7952 PINE GLEN COURT  
SARASOTA FL 34238**

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
**4616 Vintage Dr**  
83  
84 City **Sarasota** **FL** 85 **34243**

11. Pursuant to the provisions of Sections 607.0402 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: *Tracy T. Harrison* Tracy T. Harrison

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12-1 TITLE <b>D</b>	12-2 NAME <b>HARRISON, TRACY</b>	13-1 TITLE <b>Same</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12-3 STREET ADDRESS <b>7952 PINE GLEN COURT</b>	12-4 CITY, ST., ZIP <b>SARASOTA FL 34238</b>	13-2 NAME <b>Same</b>	
12-5 TITLE	12-6 NAME	13-3 STREET ADDRESS <b>4616 Vintage Dr</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12-7 STREET ADDRESS	12-8 CITY, ST., ZIP	13-4 CITY, ST., ZIP <b>Sarasota, FL 34243</b>	
12-9 TITLE	12-10 NAME	13-5 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12-11 STREET ADDRESS	12-12 CITY, ST., ZIP	13-6 NAME	
12-13 TITLE	12-14 NAME	13-7 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12-15 STREET ADDRESS	12-16 CITY, ST., ZIP	13-8 CITY, ST., ZIP	
12-17 TITLE	12-18 NAME	13-9 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12-19 STREET ADDRESS	12-20 CITY, ST., ZIP	13-10 NAME	
12-21 TITLE	12-22 NAME	13-11 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12-23 STREET ADDRESS	12-24 CITY, ST., ZIP	13-12 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 199.07(2)(b), 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 executor or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 of Block 13 of this report, or on an attachment with an address.

SIGNATURE: *Tracy T. Harrison* Tracy T. Harrison