FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 19963 13-96 DESCRIPTIONS C P94000044091 (4) DOCUMENT # **B & O CONSTRUCTION, INC.** Principal Plane of Business Mailing Address ROUTE 1. BOX 1182A **ROUTE 1. BOX 1182A COUNTY ROAD 67 COUNTY ROAD 67** BRISTOL FL 32321 BRISTOL FL 32321 3. Date Incorporated or Qualified 3a. Date of Last Report 06/07/1994 05/01/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3254848 26 Not Applicable Serte, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required Oily & State City & State 6. Election Campaign Financing \$5.00 May Be \Box 28 Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, 25 Yes No 29 Florida Statutes 30 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name O'NEAL, GLENN 82 Street Address (P.O. Box Number is Not Acceptable) **ROUTE 1, BOX 1182A COUNTY ROAD 67** 83 **BRISTOL FL 32321** 84 City Zip Code 85 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. SIGNATUR Signature itys extrains and real real registered age it and life it apply at # NOTE Redistered Agent signature magning when registation DATE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELFTE 1.1 THE Addition ☐ Change O'NEAL, GLENN 1.2 NAME **CR2E034 COUNTY RD 67 P.O. BOX 532** STREET ADDRESS 1.3 STREET ADDRESS **BRISTOL FL 32321** CHYS 70 14 CITY - ST - ZIP DELETE 2 1 TITLE ☐ Change Addition BARBER, DEXTER 2.2 NAME STATE ROAD 12 SOUTH P.O. BOX 298 STREET ADDRESS. 2.3 STREET ADDRESS BRISTOL FL 32321 CIY ST Zir 2.4 CHTY - ST - ZIF 3 1 Tille Addition FLOWERS, JEROME 3.2 NAME SIRLED ADDRESS STATE ROAD 12 SOUTH RT.1 BOX 102 3.3 STREET ADDRESS CITY-ST-20 BRISTOL FL 32321 3 4 CITY - ST - ZIP [] DELETE 4 1 71116 ☐ Change ■ Add-tion 4.2 NAME SHEET AFORES! 4.3 STREET ADDRESS CUT ST 7F 4.4 C(1Y - ST - Z(F DELETE 5 1 HILE ☐ Change Addition 5.2 NAME STELL ADDRESS 5.3 STREET ADDRESS CONSTRA 5.4 CITY - ST - ZIP DELETE 6 1 TITE Change Addition 6.2 NAME

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and doos 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 cath, that I am an officer or director of the comporation 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.

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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