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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P94000081151 (0)

JOHN A. CUNNINGHAM CONSTRUCTION, INC.

Principal Place of Business Mailing Address 77 N STATE RD 19 77 N STATE RD 13 ORLANDO FL 32833-3320 ORLANDO FL 32833 3. Date Incorporated or Qualified 3a. Date of Last Report 11/04/1994 04/19/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3279531 26 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional \Box 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 25 29 30 Florida Statutes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 1 81 Name CUNNINGHAM, JOHN A. 77 N. STATE RO. 13 Street Address (P.O. Box Number is Not Acceptable) 82 ORLANDO FL 32833 83 84 City 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, Soction 607.0505, Florida Statutes. Signature, type 3 or ported name of register; diagent and title if applicable (NOTE: Repistered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Change Addition THEF DELETE 1.1 TITLE CUNNINGHAM, JOHN A 1.2 NAME NAME 77 N STATE RD 13 1.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32833 CITY - ST - 712 1.4 City-ST-ZIP DELETE Addition Change 2 1 TITLE TITLE CUNNINGHAM, SALLIE NAME 2.2 NAME 77 N SR 13 STREET ADDRESS 2.3 STREET ADDRESS ORLANDO FL 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change ____ Addition THILE 31 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY- ST-ZiP 3.4. CITY - ST - ZIP DELETE Change Addition THUE 4.1 TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 City-ST-ZIP C41Y - \$1 - 71P DELETE 5.1 TITLE Change Addition 3111 F NAME 5.2 NAME STREET ADORESS 5.3 STREET ADDRESS CHY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition Tille 61 TITLE NAME 62 NAME STREET ADDRESS. 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP C(1Y - S1 - 2)P

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 receiper or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

CUNNINGHAM SA SIGNATURE:

FILED

Apr 25 1997 8:00am

Secretary of State

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