FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000090858 (9)

BUILDING CONSTRUCTION SUPPORT SERVICES CORPORATI

Principal Place of Business

Maling Address

FILED Jan 24 1997 8:00am Secretary of State



251 E. HARRISON STREET TALLAHASSEE FL 32301		251 E. HARRISON STE TALLAHASSEE FL 323	251 E. HARRISON STREET TALLAHASSEE FL 32301-4417				
					3. Date incorporated or Qualified 12/15/1994	3a. Date of Last R 06/24/1996	eport
2. Principal Place of Business		2a. Mailing Address			4. FEI Number Applied		pplied For
21		26			59-3313292	No	ot Applicable
Suite, Apt #, etc 22		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 Added	May Be to Fees
Zip	Country	Ζφ 1001	Countr	ý	8. This corporation has liability for intangible tax under s. 199 032,		
24	25 29 30 9. Name and Address of Current Registered Agent				Flonda Statutes Yes Mo 10. Name and Address of New Registered Agent		
		Terre riograterou Agori	81	Name	TO. Hame and Address of New Reg	istered Agent	
SMITH, DOUG			1	110,110			
	E HARRISON ST LAHASSEE FL 32301		82 Street Add		ddress (P.O. Box Number is Not Acceptable)		
			83				
			84		, , , , , , , , , , , , , , , , , , , ,		Code
ornee or r	to the provisions of Sections 607.0 registered agent, or both, in the St im familiar with, and accept the of	ale of Fiorida. Such change wa	as authorized b	v the cornora	poration submits this statement for the pu ation's board of directors. I hereby accept	rpose of changing it the appointment as	s registered registered
SIGNATURE	Sign of the hypertoir provides, and of the godered						
12.		AND DIRECTORS	NUTE Negistered Ag	ent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE DS AND DIDECTOR	IC IN 10
TIT,E	PD	DELETE	1 1 THLE		ACEMICIONO/CHANGES TO OFFICE	Change	Addition
NAME	SMITH, DOUG C		1.2 NAME			Unange	L_J ROOMON
STREET ADDRESS	251 E. HARRISON STREET			ADDRESS	٠.		
CITY - S1 - 7:P	9411 4114 6 6 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9		1.4 CiTY-				
TITLE	STD	DELETE	21 TITLE	51-21		Change	Addition
NAME	SMITH, KEVIN		2.2 NAME			_ ¥	
STREET ADDRESS	251 E. HARRISON STREET		2.3 STREE	r address			
City: St-ZP	TALLAHASSEE FL 32301		2 4 CHY-	ST-ZIP			
TITLE		DELETE	3.1 TITLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	ADDRESS			
CITY: \$1-ZiP			3.4. CITY -	ST-ZIP			
TITLE		DELETE	4.1 TITLE			☐ Change	Addition
MAME.			4. 2 NAME				
STREET ADDRESS			4.3 STREE	ADDRESS			
City-ST-ZiP			4.4 CITY -	ST-ZIP			
TITLE		DELETE	5 1 TITLE			Change	Addition
NAM !			5 2 NAME				(4)
STREET ADDRESS			5.9 STREE	ADDRESS		าา	ן גרי דיי
City - ST - 7/2	**************************************		5.4 Cti Y - :	ST - 7IP		\ V	· *\
TITLE		DELETÉ	6 1 1HLE			☐ Change	Addition
N4ME			62 NAME		1 0 0 0 0 2 0 6 1 -01/27/970100	87 <u>6</u> 1	
STREET ADDRESS			6.3 STREE	ADDRESS	-01/27/970100	7035	
City-St-7iP			6.4 CITY-5	ST - 7/P	***495.00		
14 Lan borer	non-manufit rational along the formulation of the	Market and the Artist Edward of the Artist Annual Con-	U / U		41 O C 440 07/01/2 E		

information indicated or this amulal 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 arector of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE: