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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Apr 01 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000091457 (9)

PRESTON CONSTRUCTION, INC. OF CENTRAL FLORIDA

| Principal Place of Business Mailing Ado 8218 LAZY LANE 9216 LAZY L TAMPA FL 33614 TAMPA FL 33 | | | LANE | | | | |
|-----------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-----------------------------------------------------------|----------------------------|----------------------------|------------------------------------------------------------------------|-----------------------------------|-----------------------------------------|
| | | | | | Date Incorporated or Qualified 12/15/1994 | 3a. Date of Last Re 06/10/1996 | iport |
| | w. Linebaugh | 28. Mailing Address 26 (1, D. Box | . 82 | 195 | 4. FEI Number 59-3283173 | App | plied For t Applicable |
| Surte, Apt. | | Suite, Apt. #. etc. | | | 5. Certificate of Status Desired | \$8.75 A | |
| City & State | mpa FL | City & State Z8 Tampa | FL | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 Added to | |
| 7ip | Country | Zip | Cour | ntry USA | 8. This corporation has liability for | · | |
| 24 376 | ッスフ [25] リンパ 9. Name and Address of Current | | 1301 | <u> </u> | Florida Statutes 10. Name and Address of New Re | | |
| PRES | ston, steven s | | | 81 Name | Same | | |
| | B LAZÝ LANE PA FL 33614 | | - | 82 Street Add | ress (P.O. Box Number is Not Acceptal | ple) | |
| LAM | FA FL 33014 | | ŀ | $\frac{500}{4}$ | 28 W. Linebau | 3 | |
| | | | | 84 City | anpa | FI 85 Zip C | ode |
| 11. Pursuant i | to the provisions of Sections 607.0502 | and 607.1508, Florida Statu | tes, the ab | ove-named corp | poration submits this statement for the | purpose of changing its | registered |
| office or n agent. La | egistered agent, or both, in the State o m familiar with, and accept the obligat | f Florida. Such change was ons of, Section 607.0505, F | authorized Iorida Statu | l by the corporal ites. | tion's board of directors. I hereby acce | pt the appointment as r | registered |
| SIGNATURE | | | · **** | | | | |
| 12. | Signature typicd or protect has a cold registered agent OFFICERS AND | | TE: Registered | Agent signature requi | red when reinslating) ADDITIONS/CHANGES TO OFFI | DATE | C IN 12 |
| Trice | OFFICEROAND | DELETE | 1.1 7/7 | LE T | ADDITIONS/CHANGES TO OFFI | Change | Addition |
| NAME | Preston, Steven S | | 1.2 NA | ME | same , , | - 1 | |
| STREET ADDRESS | 9218 LAZY LANE | | 1.3 STF | REET ADDRESS | 5008 w. Linebaugi | n - Ste .43 | |
| CITY - ST - ZIFI | TAMPA FL 33614 | | 1.4 017 | Y-ST-ZIP | Tampa FL 331 | -24 | |
| THUE | | DELETE | 2.1 TIT | LE | | Change | Addition |
| NAME | | | 2.2 NAI | ME | | | |
| STREET ADDRESS | | | 2.3 STF | REET ADDRESS | | : | |
| CITY - ST- ZF ¹ | | | 2. 4 CI | TY-ST-ZIP | | | |
| THE F | | ☐ DELETE | 3.1 TITI | LE | | ☐ Change | Addition |
| NAME . | | | 3.2 NAI | ME | | | |
| STREET ADDRESS | | | 3.3 STF | REET ADDRESS | | | |
| CHY ST ZIP | | T priess | | Y-ST-ZIP | | | 1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 |
| Title | | [] DELETE | 4.1 TIT | | | Change | Addition |
| NAME | | | 4. 2 NA | 1 | | | |
| STREET ADDRESS | | | | REET ADDRESS | | | |
| CHTY - ST - ZIF | | DELETE | | Y-ST-ZIP | | Chance | Addition |
| MANG | | ☐ nerest | 5.1 TITI | 1 | | L. Change | Addition |
| NAME STREET ADDRESS | | | 5.2 NAI | | | | |
| | | | | REET ADDRESS | | | |
| CHTY - ST - ZIF | | ☐ DELETE | 6.1 TIT | Y-ST-ZIP | | Change | Addition |
| NAME | | | 6.2 NAI | | | - Duange | Montroll |
| STREET ADDRESS | | | | 1 | | | |
| AUN OF NO | | | 0.3 511 | REET ADDRESS | | | |

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 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.

REQUIRED