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

PROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P95000014932 (4)

DOCUMENT # 1. Corporation Name

MCGINLEY PAVING, INC.



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Principal Place of Business Mailing Address									a sadisas sia sain nisti dâsis d		II SIA DIBIT	18(88 6)(68 3)8) (8	<b> </b>	
5050 EDWARDS STREET JACKSONVILLE FL 32254				5050 EDWARDS STREET JACKSONVILLE FL 32254										
									3. Date incorporated or Qualified 02/22/1995	3a. Date	of Last F	Report		
2. Principal Pla	ace of Busines	s	2a.	Mailing Address					4, FEI Number	<i>i</i> A		Applied For		
21				Code Ant A ch					59-329734	70		Not Applicable	0	
Suite, Apt. #, etc.				Suite. Apt. #, etc.					5. Certificate of Status Desired		\$8.75 Additional Fee Required			
City & State				City & State					6. Election Campaign Financing \$5.00 May Be					
<b>Z</b> ip		28	Zip Country			Added to Fees					-			
24	2	Country 5	29	p	30				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  X Yes No  No					
	9. Name and Address of Current F			l				I	10. Name and Address of New Registered Agent					
						81	Name		<u></u>					
MCGII	NLEY, GARY	R				82	Stroot	Addroo	s (P.O. Box Number is Not Acceptate	)(a)				
5050 EDWARDS STREET							2 Sireer Auc		5 (F.O. DOX NOTICE) IS NOT Acceptate	ne;				
JACKSONVILLE FL 32254						83								
						84	City				<b>85</b> Zi	io Code	-	
							-			FL				
or register	red agent, or be	oth, in the State of I	Florida, Such i	.1508, Florida Statute change was authorize 505, Florida Statutes.	ed by the a	ove n corpo	iamed co praticie's	rporatio board o	on submits this statement for the puriof directors. I hereby accept the app	rpose of cha ointment as	nging its i registered	registered offici d agent. I an	ce	
SIGNATURE _														
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STREET ADDRESS							ADDRESS							
CITY-ST-ZIP														
14 I do tereb	L certify that th	no information europi	hed with this fi	lina is valuntarily furn	ebod and	IIY-S	rest out	I for four t	the exemption stated in Section 110	Ožrana Ela	ido Statu	ton I further		

root ereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. Hurther certify that the information indicated on this annual report is such 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. They deliver 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 charged or our national entires with an address.

SIGNATURE: SIGNATURE MOLTYPE

Gary McGinley RINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-2-96

(904) 786-8605

Date

Dayt-ne Phone #