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 # P95000046386 (5)

JERNIGAN BROTHERS CONTRACTING, INC.

Principal Place of Business

Mailing Address

FILED Apr 30 1997 8:00am Secretary of State



1318 OAK HILL STREET BEFFNER FL 33584		1318 OAK HILL STREET SEFFNER FL 33584-4912				
					3. Date Incorporated or Qualified 06/12/1995	3a. Date of Last Report 08/19/1996
2. Principal Place of Business 21		2a. Mailing Address 26		4. FEI Number APPLIED FOR 59-3	32/072 Applied For Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip 29	30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No	
	9, Name and Address of Current	Registered Agent		r	10. Name and Address of New Reg	Jistered Agent
TROSSELL, WILLIAM IT ON				81 Name		
	8 OAK HILL STREET FNER FL 33584		62		lress (P.O. Box Number is Not Acceptabl	e)
			83			
			84	City		FL 85 Zip Code
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. SIGNATURE Signature, typed or printed name of registered agent and little of applicable (NOTE Registered Agent segnature required when reinstating) DATE						
12.	OFFICERS AND		13.	era b grantanti redo	ADDITIONS/CHANGES TO OFFICE	
TITLE	D	☐ DELETE	1.1 TITLE	7		☐ Change ☐ Addition }
NAME	TRUSSELL, WILLIAM H JR		1.2 NAME		•	
STREET ADDRESS	1318 OAK HILL STREET		1.3 STREET	r address		[8
CITY-ST-ZIP	SEFFNER FL 33584		1.4 CITY-	ST - ZIP		
TITLE	STD	☐ DELETE	2.1 TITLE			☐ Change ☐ Addition C
NAME	TRUSSELL, TAMI		2.2 NAME			
STREET ADDRESS	1318 OAK HILL STREET		2 3 STREE	ADDRESS		
CITY-ST-ZIP	SEFFNER FL 33584		2 4 CITY-	S1 · ZIP		
TITLE	VD	☐ DELETE	3.1 THILE			Change Addition
NAME	WRIGHT, JERRI 3505 BEECHWOOD BLVD		3.2 NAME			
STREET ADDRESS	TAMPA FL 33619		3.3 STREE	i		
CITY-ST-ZIP TITLE	IAMI'A IL SSOIE	DELETE	3.4. CITY - 4.1 TITLE	S1-ZiP		Change Addition
NAME		hand Meeril	4. 2 NAME			Fin change Fin Modulott
STREET ADDRESS			4.3 STREET			
CITY-ST-ZIP			4.4 CITY-S			
TITLE		DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY-S			
TITLE		☐ DELETE	61 THILE			☐ Change ☐ Addition
NAME			62 NAME			<u> </u>
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP			6.4 CITY-S	31 - ZIP		

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.