

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Murtham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000063396 (2)

1. Corporation Name

STONEY HILL CONSTRUCTION, INC.



Principal Place of Business

16526 LAKESHORE DRIVE
MINNEOLA FL 34755

Mailing Address

~~800 S. ORANGE AVENUE~~
~~SUITE 2000~~
~~ORLANDO FL 32801-3432~~

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 16526 Lakeshore Drive

27 Suite, Apt. #, etc.

27 City & State

28 Minneola, FL

29 Zip

34755

30 Country

3. Date Incorporated or Qualified

08/16/1995

3a. Date of Last Report

4. FET Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

7. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

~~A.G.C. CO.~~
~~200 S. ORANGE AVENUE~~
~~SUITE 2000~~
~~ORLANDO FL 32801-3432~~

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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]

Name, Registered Agent signature required when registering

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	CAHOURS, HILAIRE A JR.	
STREET ADDRESS	16526 LAKESHORE DRIVE	
CITY-ST-ZIP	MINNEOLA FL 34755	
TITLE	D	☐ DELETE
NAME	CAHOURS, KEVIN C	
STREET ADDRESS	16526 LAKESHORE DRIVE	
CITY-ST-ZIP	MINNEOLA FL 34755	
TITLE	D	☐ DELETE
NAME	CAHOURS, GORDON C	
STREET ADDRESS	16526 LAKESHORE DRIVE	
CITY-ST-ZIP	MINNEOLA FL 34755	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D/P	☒ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	D/S/T	☒ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(g), 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.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/28/96 407/351-2042
Date Filing Phone

CR2E034 (12/95)