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

PROFIT CORPORATION ANNUAL REPORT

1997



LORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000065740 (9)

SUPERIOR DESIGN CONSTRUCTION COMPANY, INC.

Principal Place of Business

Mailing Address

122 STATE ROAD 13 JACKBONVILLE FL 32259 122 STATE ROAD 13 JACKSONVILLE EL 32259-288

FILED May 14 1997 8:00am Secretary of State



JACKBONVILLI	E FL 32259	JACKSONVILLE FL 32259-28	89					
			,		3. Date Incorporated or Qualified 08/24/1995		te of Las 25/199	st Report)6
- ヘヘル	lace of Business O San Jose Mu	26. Mailing Address	Tric	x Blut	4. FEI Number 59-3373892			Applied For
21 O(1) Suite, Apt.	# alc	Suite, Apl. #, etc.	<u> </u>	K DIUI	39-3373692		¢9.7	Not Applicable 5 Additional
22 1		27 4			Certificate of Status Desired			Required
City & State 23 JOY	FU	City & State 28 Jacksonu		ــــــــــــــــــــــــــــــــــــــ	6. Election Campaign Financing Trust Fund Contribution			00 May Be ed to Fees
24 30 20	93 25 USA	29 30003 3	Country ()	· ~		Yes 🍒	No.	ir s. 199.032
1471	9. Name and Address of Current	Hegistered Agent	81	Name	10. Name and Address of New Re	gistered A	gent	
WILLIAMS, STEPHEN 3146 BRACHENBURY LANE								
	KSONVILLE FL 32225		82	Street Addres	ss (P.O. Box Number is Not Acceptab	ole)		
67 10	TOOTHIGGE TE GENERAL		83	····				
			84	City			85 7	7 _{ID} Code
44			<u> </u>	L		<u> FL</u>		·
office or re agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	and 607.1508, Florida Statutes of Florida. Such change was aut tions of, Section 607.0505, Florid	, the abov horized by da Statute	e-named corpo y the corporatio s.	ration submits this statement for the p in's board of directors. I hereby accep	urpose of of the appo	changin sintrnent	g its registered as registered
SIGNATURE	Signature, typed or printed name of registered ages	t and title if applicable. (NOT) F	tog stered Ag	ent signature required	1 when reinstating)	DATE		
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND		
TITLE	Р	☐ DELETE	1111111				[_] Chang	ge 🔲 Addition
NAME	WILLIAMS, STEPHEN W		12 NAME					
STREET ADDRESS	3146 BRACHENBURY LANE			LADDRESS				
CITY-ST-ZIP TITLE	JACKSONVILLE FL 32225	DETEL	1.4 Cily - 9	51 - 7IP		·	Chanc	ge Addition
NAME		☐ Dfft.ir	2.1 TITLE 2.2 NAME				T Cuauf	je 🛄 Addition
STREET ADDRESS			2.3 STREET	T ADDRESS				
CITY-ST-ZIP			2.4 GHY-	į	·	,		
TITLE		DELETE	3171111	07 21			Chang	ge Addition
NAME		· ·	3.2 NAME	ľ				
STREET ADDRESS			3.3 STREET	LADDRESS				
CITY-ST-ZIP			3.4 CITY-	ST-ZiP				
TITLE		☐ DELETE	4.1 TITLE				☐ Chang	ge 🔲 Addition
NAME	i		4. 2 NAME					
STREET ADDRESS				I ADDRESS				
CITY-ST-ZIP		Director C	4.4 Dily-5	ST - ZIP			Chan	an Addition
TITLE		☐ DECET€	51 TITLE				∐ Chanç	ge 🔲 Addition
NAME STREET ADDRESS			5 2 NAME	Attropece				
			5.3 STREET	ADDRESS				
CITY-ST-ZIP TITLE		DETETE	6.4 CHY-8	01.51			Chang	ge 🔲 Addition
NAME			62 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				
City-ST-ZIP			6.4 CITY - S					
VI 41			J. 1 () 1 1					

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 Statutos. 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 changled, or on an attachment with an address.

OLONIATURE.

Harrison W/1/2 40 6 4/2

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