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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS P95000066648 (3) DOCUMENT #
1. Corporation Name

SOUTHERN CONSTRUCTION, INC.

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Mailing Address



4330 FIRST A NAPLES FL 3	avenue southwest 13999	4330 FIRST AVENUE NAPLES FL 33999	4330 FIRST AVENUE SOUTHWEST NAPLES FL 33999				
					3. Date Incorporated or Qualified 08/29/1995	3a. Date of	Last Report
2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number	-k	Applied For
21		26		•	65-0607406		Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		8.75 Additional Fee Required
City & State		Oity & State			Flection Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Ζιρ 	Country	Zip	Cour	atry	8. This corporation has liability for		nder s. 199.032,
24	25	29	30			k No	
	9. Name and Address of Cu	rrent Registered Agent		81 Name	10. Name and Address of New F	legistered Age	int
00000	151011 0501405 0014D11		1		ichael C. Batten		
	RATION SERVICE COMPANY		•	B2 Street Addr	ress (P.O. Box Number is Not Acceptat		
	YS STREET				330 lst Avenue S	.W.	
TALLAHA	ASSEE FL 32301-2525		{	83			
			ŀ	84 City			35 Zip Code
				Na Na	aples		33000
or registere	d agent, or both, in the State of I	1502 and 607.1508, Florida Statul Florida: Such change was authoriz Section 607.0505, Florida Statutes	ed by the c	ve-named corpor orporation's boar	ration submits this statement for the pured of directors. I hereby accept the app	ointment as reg	istered agent. Lam
SIGNATURE _	Michael C.	BITTER			4	1.15-9	16
12.				Agent signature require	U when remaining	DAH	انا
TITLE	D	AND DIRECTORS DELETE	13.	,,,	ADDITIONS/CHANGES TO OFF		
NAME	BATTEN, MICHAEL C		1, 1 TI			_ L	hange 🔲 Addition
STREET ADDRESS	4330 FIRST AVENUE SO	ITHWEST	1.2 NA				
	NAPLES FL 33999	DIUMESI		RELI ADDRESS			
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NAME			5.2 NA				
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CITY-ST-ZIP				Y-S1-7IP			
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NAME		_	6.2 NA				- <u>-</u>
STREET ADDRESS				REET ADDRESS			
CITY-SY-ZIP				Y - S1 - ZIP			•
14. I do hereby	certify that the information suppli	ed with this filing is voluntarily furr			or the exemption stated in Section 119.	07(3)(k), 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 Battings President 4/15/86 941-353-4697