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

P95000068153 (2) **DOCUMENT #** 1. Corporation Name

MORGAN	BUILDING	CONTRAC*	rors,	INC.

Principal Place of Business Mailing Address 4201 WOODLARK DRIVE 4201 WOODLARK DRIVE TAMPA FL 33624 TAMPA FL 33624							
IAMPA PL 33	702 9	TAMPA FL 33624		Date Incorporated or Qualified 09/05/1995		of Last Report	
2. Principal Pla	ace of Business	2a. Mailing Address 26		4. FEL Number 59-334244	7	Applied For Not Applicable	
Suite, Apt. #	#, etc.	Suite, Apt. #, etc		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	Country 30	8. This corporation has liability for i	intangible tax		
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New R	egistered A	gent	
			81 Name				
	n, Russell G		82 Street Add	ress (P.O. Box Number is Not Acceptable	6e)		
	DODLARK DRIVE						
IAMPA I	FL 33624		83				
			84 City		FL	85 Zip Code	
11 Pursuant t	to the provisions of Sections 607.0502	2 and 607 1508 Florida Statu	tes the above named como	ration submits this statement for the pur		ging its registered office	
or registere	ed agent, or both, in the State of Flori th, and accept the obligations of Sect	ida. Such change was author.	zed by the corporation's boa	and of directors. Thereby accept the appoint	pose of chan pintment as re	egistered agent. I am	
	in, and accept the obligations or, Sect	uon cortocos, Florida Statute	·S.				
SIGNATURE _	Stynature, typed or protect name, of registered a jert	tand the tapple acres (N	Cit Begilned Age 1 squature regime	ad where numeral rige	C)ATE		
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	ICERS AND [DIRECTORS IN 12	
TITLE	D vonotu oronor n	☐ DELETE	T 3 TITUE			Change 🔲 Addition	
NAME	MORGAN, GEORGE R		1.2 NAME				
STREET ADDRESS	4201 WOODLARK DRIVE		1.3 STREET ADDRESS				
CITY - ST - ZIP	TAMPA FL 33624	- Dreeze	1.4 CI'Y - \$! - 7IP				
Trité	MORGAN, RUSSELL G	DELETE	2 1 TIBLE		Ш	Change	
NAME	4201 WOODLARK DRIVE		2 2 NAME				
STREET ADDRESS	TAMPA FL 33624		2 3 STREET ADDRESS				
CITY - ST - ZIP TITLE	17mr A 1 E 33024	[] DELETE	2.4 CITY ST-ZIP 3.1 FITLE		<u>-</u>	Change	
NAME		bittell	3.2 NAME		LJ	onangs [] Addition	
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4 CI2Y - S1 - ZIP				
TITLE		DELETE	4 1 TITLE			Change Addition	
NAME		L. Decene	4.2 NAME		لــا	Cuerdo 🔲 uduno.	
STREET ADDRESS			4.3 STREET ADDRESS				
CITY - ST - ZIP			4.4 CHY - ST - ZIP				
TITLE		☐ DELETE	5 1 The		П	Change Addition	
NAME	1		5.2 NAME		J	·	
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-S1-ZIP			5.4 CHY - ST-ZIP				
TITLE		☐ DELETE	6 1 TH LE		П	Change Addition	
NAME			5 2 NAME		لبها	, <u>,</u>	
STREET ADDRESS			6.3 STHEET ADDRESS				
CITY - S1 - ZIF			6.4 CITY - ST-ZIP				

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)(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 perporation 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 changing or or an attachment with an address

NAME OF SIGNING OFFICER OR DIRECTOR MORGAN 4-27-96 (813) 265-0896 SIGNATURE: SIGNATURE AND TYPE