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

DOCUMENT # P95000070839 (2)

AB CONSTRUCTION, INC.

Principal Place of Business

Mailing Address



5987 COLONEL SCOTT DRIVE TALLAHASSEE FL 32308		5987 COLONEL SCOTT DRIVE TALLAHASSEE FL 32308				
				3. Date Incorporated or Qualified 09/14/1995	3a. Date of Last Report	
2. Principal Pla		2a. Mailing Address		4. FEI Number	Applied For	
21 1137	Blackhawk Wau	26 PO BO	<u> 15572</u>	59-3333-91		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	Status Desired \$8.75 Additional Fee Required	
City & State 23 TALLKH MS S GE FC		City & State 26 TACLMHASSEE FL		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Zip	Country	Zip	Country	8. This corporation has liability for in		
24 323			30 USA	Florida Statutes Yes		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					egistered Agent	
			81 Name		j	
BEATY, ALICE A 82 Street Address (P.O. Box Number					e)	
BEATY, ALICE A Street Address (P.O. Box Number is Not Agceptable) Street Address (P.O. Box Number is Not Agceptable) 137 Glack hawle way						
TALLAHASSEE FL-32308						
84 City				//	85 Zip Code	
			///	~	FL 323/2	
11. 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 agont and		Registered Agent signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFI	CFRS AND DIRECTORS IN 12	
12.	OFFICERS AND E		13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12	
TITLE	PD ALIOS A	☐ DELETE	1. 1 TITLE		No pum do D vicence i	
NAME	BEATY, ALICE A	_	1.2 NAME	- Rhaddenul Wan	18	
STREET ADDRESS	5987 COLONEL SCOTT DRIV	C	1.3 STREET ADDRESS	37 Blackbowle Way	اِ	
CITY-ST-ZIP	TALLAHASSEE FL 32308	FT NEITE		124 FU 3630 U	Change Addition	
TITLE		DEFELE	2 1 TITLE			
NAME			22 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
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NAME:			3.2 NAME			
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NAME			4.2 NAME			
STREFT ADDRESS			4.3 STREET ADDRESS			
CITY · ST · ZIP		F1 herete	4.4 CITY - ST - ZIP		Change Addition	
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NAME			5 2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP		C) britte	5.4 CITY - ST - ZIP		☐ Change ☐ Addition	
TITLE		DELETE	6. 1 TITLE		T custing T Monitori	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY - ST - ZIP		OZZOWA Florida Chat dea 1 further	
14. I do hereb	y certify that the information supplied wit	n this filing is voluntarily furnish	ned and does not qualify	for the exemption stated in Section 119.	or (a)(k), Fiorida atatutes, Fiurther	

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 is supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 changed, or on an attachment with an address.

SIGNATURE:

IGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/96

733-4059

Davine Phone II