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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000094721 (4)

1. Corporation Name

TEPCO NORTHWEST CONSTRUCTION SERVICES, INC.



Principal Place of Business

10 TRAIL RUN
FLAGLER BEACH FL 32136

Mailing Address

10 TRAIL RUN
FLAGLER BEACH FL 32136

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

9. Name and Address of Current Registered Agent

TEPEE, CAROL A
10 TRAIL RUN
FLAGLER BEACH FL 32136

2a. Mailing Address

26 P.O. Box 1650

Suite, Apt. #, etc.

27

City & State

28 FLAGLER Beach, Fla

29

Zip 32136

30 Country USA

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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

Carol A. Teepe

Printed Name of Registered Agent

DATE

12. OFFICERS AND DIRECTORS

TITLE CAROL A. TEEPE DELETE
NAME
STREET ADDRESS 10 TRAIL RUN
CITY-ST-ZIP FLAGLER Beach, Fla., 32136

TITLE VICE PRESIDENT DELETE
NAME DAWN C. TEEPE
STREET ADDRESS 10 TRAIL RUN
CITY-ST-ZIP FLAGLER Beach, Fla., 32136

TITLE DELETE
NAME
STREET ADDRESS
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 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: *Carol A. Teepe*

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-96 904-439-4739
Daytime Phone

CR2E034 (12/95)