

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

FILED
Apr 29 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000003614 (0)

1. Corporation Name
I.B. WILLIAMS MASONRY INC.



Principal Place of Business 6683 CRILL AVE PALATKA FL 32177	Mailing Address 6683 CRILL AVE PALATKA FL 32177
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 106 Cypress Dr.		2a. Mailing Address P.O. Box 485		3. Date Incorporated or Qualified 01/08/1996	
21. City & State Bostwick FL	22. Zip 32007	26. City & State Bostwick FL	27. Zip 32007	4. FEI Number 59-3350702	Applied For <input type="checkbox"/> Not Applicable
23. City & State Bostwick FL		28. City & State Bostwick FL		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24. City & State Bostwick FL		29. City & State Bostwick FL		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25. Country USA		30. Country USA		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent WILLIAMS, BRENDA J 6683 CRILL AVE PALATKA FL 32177		10. Name and Address of New Registered Agent 81 Name Kimberly K. Williams 82 Street Address (P.O. Box Number is Not Acceptable) 106 Cypress Dr. 83 84 City Bostwick FL 85 Zip Code 32007	
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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 **Kimberly K. Williams** **Kimberly K. Williams** **4-19-98**
Signature typed or printed name of new registered agent and title if applicable (NOTE - Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	NAME WILLIAMS, I.B. JR	11 TITLE PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 6683 CRILL AVE	CITY-ST-ZIP PALATKA FL 32177	12 NAME WILLIAMS, I.B. JR.	
	<input type="checkbox"/> DELETE	13 STREET ADDRESS 106 CYPRESS DR.	
TITLE VD	NAME WILLIAMS, BRENDA J	14 CITY-ST-ZIP BOSTWICK FL 32007	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 6683 CRILL AVE	CITY-ST-ZIP PALATKA FL 32177	2.1 TITLE	
	<input checked="" type="checkbox"/> DELETE	2.2 NAME	
		2.3 STREET ADDRESS	
		2.4 CITY-ST-ZIP	
	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY-ST-ZIP	
	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: **I.B. Williams Jr** (904) 328-3485

CR2E034 (10/97)