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PROFIT CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P9600007342 (4) LOGAN & CURRIN BUILDING ENTERPRISES, INC.

Principal Place of Business Mailing Address 1003 EAST AVENUE NORTH 1003 EAST AVENUE NORTH SARASOTA FL 34237 SARASOTA FL 34237 3. Date Incorporated or Qualified 3a. Date of Last Report 01/24/1996 4. FE! Number 65-0635333 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable 26 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zìp Country 8. This corporation has liability for intangible tax under s. 199.032 Yos No 24 Florida Statutes 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KELLY, TIMOTHY J 1003 EAST AVENUE NORTH Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34237 83 84 City 85 Zip Code 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 registeriod agent and the it applicable (NOTE: Registered Agent signature regulred when reliabling) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6)Addition DELLTE Change TITLE 1.1 TITLE KELLY, TIMOTHY J 1.2 NAME 1003 EAST AVENUE NORTH STREET ADDRESS 1.3 STREET ADDRESS SARASOTA FL 34237 CITY-ST-ZIP 1.4 CHTY - ST- ZIF DELETE Change Addition TITLE 2111111 2.2 NAMI STREET ADDRESS 2.3 STHELL ADDRESS CITY-ST-ZIP 2 4 CHY- \$1 - 7IP DELETE TITLE 3.1 11111 Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - \$1 - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 "IILE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CHY-S1-ZIP DELETE Change Addition TITLE 5.1 THILE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-S1 - ZIE DELETE TITLE 6.1 1 111 Change ___ Addition 6.2 NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-ZIP 6.4 C TY - ST - ZIP

formation supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutos, I further certify that the annual report or supplemental finitual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name (Annual Chapter 607) and attachment with an address. I do hereby certify that information indicated I am an officer or dire

SIGNATURE

Timothy J. Kelly

4-22-97

(941) 366-4925

FILED

Apr 28 1997 8:00am

Secretary of State