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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000011073 (9)

FILED Apr 28 1997 8:00am Secretary of State

| GARY E. GOOCH CON | STRUCTION INC. | | | | |
|--|---|--|--|--|---|
| 2840 D REMINGTON GREEN CIRCLE 2 | | Mailing Address 2840 D REMINGTON GREEN CIRCLE TALLAHASSEE FL 32308-1570 | | A CORDINARI (NO CONTO DINI) BONI BONI BONI DONE MAN ADIN (DOCO 11)1 NEW (| |
| | | | | Date incorporated or Qualified 02/01/1996 | 3a. Date of Last Report |
| 2. Principal Place of Egainess 21 7766 CORWUC | 2001 A LN. 26 | Mailing Address | BeNUCOPIA LN. | 4. FEI Number 59 - 33 5 859 | Applied For Not Applicable |
| Sule, Apit #, etc. 22 ALLAHASSEP | 27 | Suite, Apl. #, etc. | ISVI | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & State 23 | 28 | Floams | }- | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zip Cour 24 32308 25 4 | Leov 29 | 122308 | Country 30 Leo N | This corporation has liability for Florida Statutes | r intangible tax under s. 199.032, ☐ Yes |
| 9. Name and Ado | dress of Current Registe | red Agent | | 10. Name and Address of New R | egistered Agent |
| GOOCH, GARY E | | | 81 Name | 1 E. Good | |
| 2840 D REMINGTON GREEN CIRCLE 82 Street Addr | | | ss (P.O. Box Number is Not Accepta | abje) | |
| TALLAHASSEE FL 32308 | | | 6 CORNUCOPINA | Lang | |
| | | | 83 | | i |
| | | | 84 City All | AHABSEP | FL 85 Zip Code 3 2 36% |
| 11. Pursuant to the provisions of So | ections 607.0502 and 607 | 7.1508, Florida Sta | tutes, the above-named corp | oration submits this statement for the ion's board of directors. I hereby according to the control of the contr | purpose of changing its registered |
| agent 1 am familiar with, and a | ecept the obligations of | Section 607.0505, | Florida Statutes | on a board of directors. The boy door | i an |
| SIGNATURE GANY E. | booch | | Joyle Am | | 4-22-97 |
| Sog noine type the profile in 12. | arile of registered agent and title if OFFICERS AND DIRECT | | NOTE: Regisy rock Agent signature require | ADDITIONS/CHANGES TO OFF | ICERS AND DIRECTORS IN 12 |
| President | | DELETE | 1,1 TITLE | 7.0017/010/017/1020 10 011 | CERS AND DIRECTORS IN 12 Change Addition |
| WILL CAMY E. C | Sooch | | 1,2 NAME | | |
| STREET ADDRESS 1746 COM | NUCOPIN LANG | | 1.3 STREET ADDRESS | | |
| CITY ST ZIF TALLAMASS | 11 Fla 3 | 2308 | 1.4 CITY-ST-ZIP | | |
| III Secretar | 1 | DELETE | 2.1 TITLE | | Change Addition |
| HAME GAMY E | Gooch 1 | | 2.2 NAME | | |
| SIREET ADDRESS 7764 CO | GOOCH LAN | P 22.00 | 2.3 STREET ADDRESS | | *14 |
| CITY 50 70 14111 | tassed & 10 | 107-0 | 2. 4 CITY+S1-ZIP | | |
| HILE | | ☐ DELETE | 3.1 TITLE | | Change Addition |
| NAME | | | 3.2 NAME | | |
| SHEET ADDRESS | | | 3.3 STREET ADDRESS | | |
| THILE COLVEST AT | | DELETE | 3.4. CITY-ST-ZIP | | Change Addition |
| NAME | | L., Detell | 4.2 NAME | | FI August FI Vaguiou |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | · · |
| City-St-ZiP | | | 4.4 CITY-S1-ZIP | | |
| Till(| | DELETE | 5.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 5.2 NAME | | |
| SUBSET CATACOURTSS | | | 5.3 STREET ADDRESS | | |
| CHY-SU-26 | | | 5.4 CITY-ST-ZIP | | |
| 1111 | | DELETE | 61 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 6.2 NAME | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | |
| CHY - \$1 - 710* | | 61 | 6.4 CITY - ST - ZIP | | |
| i do hereby certify that the info information indicated on this ar I am an officer or pirector of the | rmation supplied with this Mual report or supplement e cornoration or the recei | s niing ooes not qu ntal annual report ver or trustee emb | Jailry for the exemption stated Strue and accurate and that Sowered to execute this report | in Section 119.07(3)(i), Florida Statut my signature shall have the same leg I as required by Chapter 607, Florida | ies, i turther certify that the gal effect as if made under oath; that Statutes; and that my name |

SIGNATURE: