

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

FILED

May 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **P96000032874 (5)**

1. Corporation Name
HILMOR CONSTRUCTION, INC.



Principal Place of Business 1800 NORTH 1ST STREET COCOA BEACH FL 32931 1800 S. Atlantic Ave Suite A Cocoa Beach, FL 32931	Mailing Address 1800 NORTH 1ST STREET COCOA BEACH FL 32931-3001 1800 S. Atlantic Ave. Suite A Cocoa Beach, FL 32931-2344
---	--

2. Principal Place of Business 21 1800 S. Atlantic Ave Suite, Apt. #, etc. 22 Suite A City & State 23 Cocoa Beach, FL Zip 24 32931-2344 25 USA	2a. Mailing Address 26 1800 S. Atlantic Ave Suite, Apt. #, etc. 27 Suite A City & State 28 Cocoa Beach, FL Zip 29 32931-2344 30 USA
--	---

3. Date Incorporated or Qualified 04/15/1996	3a. Date of Last Report N/A
4. FET Number 59-3384403	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent
MORLIN, JONN
~~XXX 1800 NORTH 1ST STREET~~
COCOA BEACH FL 32931

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	2815 S. Atlantic Ave. #303
83	
84 City	Cocoa Beach, FL
85 Zip Code	32931-2170

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	HILL, JOYCE P	
STREET ADDRESS	/4 CHESTNUT COURT	
CITY-ST-ZIP	DOBBS FERRY NY 10522	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P= President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Morlin, Joyce P.	
1.3 STREET ADDRESS	2815 S. Atlantic Ave. #303	
1.4 CITY-ST-ZIP	Cocoa Beach, FL 32931-2170	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
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 do 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: *Joyce P. Morlin* 4/23/97 (407) 783-0591

CR2E034 (9/96)