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Mar 31 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 # P96000097267 (4)

1. Corporation Name:
BRANNAN CONSTRUCTION, INC.



Principal Place of Business

126 SOUTH KINGS ROAD
P.O. BOX 129
HILLIARD FL 32046

Mailing Address

126 SOUTH KINGS ROAD
P.O. BOX 129
HILLIARD FL 32046-0129

2. Principal Place of Business

21 126 South Kings Rd.

Suite, Apt. #, etc.

City & State

23 Hilliard FL.

Zip

25 32046

Country

25 US

2a. Mailing Address

26 P.O. Box 129

Suite, Apt. #, etc.

City & State

28 Hilliard FL.

Zip

29 32046

Country

30 US

3. Date Incorporated or Qualified

11/25/1996

3a. Date of Last Report

4. FEI Number

59-3403499

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

BRANNAN, LARRY THOMAS
126 SOUTH KINGS ROAD
P.O. BOX 129
HILLIARD FL 32046

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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 registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME BRANNAN, LARRY THOMAS
STREET ADDRESS RT. 3, BOX 1382 - LOT 18
CITY-ST-ZIP FOLKSTON GA 31537

TITLE D ☐ DELETE

NAME BRANNAN, KENNY LEE
STREET ADDRESS RT. 4, BOX 8035
CITY-ST-ZIP HILLIARD FL 32046

TITLE D ☐ DELETE

NAME BRANNAN, LISA GAIL
STREET ADDRESS P.O. BOX 912
CITY-ST-ZIP HILLIARD FL 32046

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition

1.2 NAME BRANNAN, LARRY THOMAS
1.3 STREET ADDRESS RT 3 BOX 1382 - LOT 18
1.4 CITY-ST-ZIP FOLKSTON GA. 31537

2.1 TITLE V ☒ Change ☐ Addition

2.2 NAME Brannan, Kenneth Lee
2.3 STREET ADDRESS Rt 4 Box 8035
2.4 CITY-ST-ZIP Hilliard FL. 32046

3.1 TITLE T ☒ Change ☐ Addition

3.2 NAME Brannan, Lisa Gail
3.3 STREET ADDRESS P.O. Box 912 - Rt. 4 Box 8022
3.4 CITY-ST-ZIP Hilliard FL. 32046

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-10-97

Date

904-845-3350

Daytime Phone # 0000414

CR2E034 (9/96)