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

PROFIT CORPORATION ANNUAL REPORT

1998

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CITY-ST-ZIP



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700008546 (8)

TAYLOR BUILDING CONTRACTOR, INC.

Principal Place of Business Mailing Address 808 BRYN MAWR ROS BRYN MAWR ORLANDO FL 32804 ORLANDO FL 32804 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/23/1997 2. Principal Place of Business 2a. Mailing Address Applied For 3421259 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 П Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 25 Personal Property Tax due June 30. Yes 24 29 30 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 TAYLOR, CHARLES E JR 808 BRYN MAWR 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32804 83 В4 City Zip Code 85 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. or printed name ul registered agent additute il ni princable SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition TAYLOR, CHARLES E JR 1.2 NAME **808 BRYN MAWR** STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 32804 CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE 2.1 TITLE Change Addition TITLE TAYLOR, ANNE M NAME 2.2 NAME **808 BRYN MAWR** STREET ADDRESS 2.3 STREET ADDRESS ORLANDO FL 32804 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME **4.2 NAME** STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY - ST - ZIP DELETE Addition TITLE 61 THTLE Change 6.2 NAME STREET ADDRESS **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. CIGNATURE:

1/21/00

444 2004

FILED

Feb 09 1998 8:00am

Secretary of State

CR2E034