

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

FILED

Mar 21 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 # S07746 (8)

1. Corporation Name
UNIT ONE UNDERGROUND CONSTRUCTION, INC.



Principal Place of Business
17300 NAIAD COURT
PUNTA GORDA FL 33955

Mailing Address
17300 NAIAD COURT
PUNTA GORDA FL 33955-4527

3. Date Incorporated or Qualified
10/23/1990

3a. Date of Last Report
04/05/1996

2. Principal Place of Business
21 27375 JONES LOOP ROAD
Suite, Apt. #, etc
22 PUNTA GORDA
City & State
23 FL
Zip Country
24 33982 25

2a. Mailing Address
26 27375 JONES LOOP ROAD
Suite, Apt. #, etc
27 PUNTA GORDA
City & State
28 FL
Zip Country
29 33982 30

4. FEI Number
07-1702456 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

10. Name and Address of New Registered Agent

STURDIVANT, FRANK
17300 NAIAD COURT
PUNTA GORDA FL 33950

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 (NOTE: Registered Agent signature required when reinstating) DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|----------------------|---|--|
| TITLE | PD | 1.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | STURDIVANT, FRANK | 1.2 NAME | |
| STREET ADDRESS | 17300 NAIAD COURT | 1.3 STREET ADDRESS | 27375 JONES LOOP ROAD |
| CITY, ST, ZIP | PUNTA GORDA FL | 1.4 CITY, ST, ZIP | PUNTA GORDA, FL 33982 |
| TITLE | ST | 2.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | STURDIVANT, FRANK | 2.2 NAME | |
| STREET ADDRESS | 17300 NAIAD COURT | 2.3 STREET ADDRESS | 27375 JONES LOOP ROAD |
| CITY, ST, ZIP | PUNTA GORDA FL | 2.4 CITY, ST, ZIP | PUNTA GORDA, FL 33982 |
| TITLE | VSD | 3.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | STURDIVANT, JOHNNY | 3.2 NAME | |
| STREET ADDRESS | 414 BURNINGTREE LANE | 3.3 STREET ADDRESS | 27375 JONES LOOP ROAD |
| CITY, ST, ZIP | PUNTA GORDA FL | 3.4 CITY, ST, ZIP | PUNTA GORDA, FL 33982 |
| TITLE | | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY, ST, ZIP | | 4.4 CITY, ST, ZIP | |
| TITLE | | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY, ST, ZIP | | 5.4 CITY, ST, ZIP | |
| TITLE | | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY, ST, ZIP | | 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: *Frank Sturdivant* FRANK STURDIVANT 3-17-97 "941637-0095"
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dytline Phone #

CR2E034 (9/96)