FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S14667** **(7)**

1. Corporation Name
PHILCO CONSTRUCTION, INC.

Principal Place of Business	Mailing Address
142 S SWOOPE AVE MAITLAND FL 32751	142 S SWOOPE AVE MAITLAND FL 32751

3. Date Incorporated or Qualified: **11/21/1990**
3a. Date of Last Report: **03/27/1995**

2. Principal Place of Business
21
Street Apt. #, etc.
22
City, & State
23
Zip 24 Country 25

2a. Mailing Address
26
Street Apt. #, etc.
27
City, & State
28
Zip 29 Country 30

4. FEI Number: **59-3039205** ☐ 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

BIRCHMIER, RANDALL R.
142 S SWOOPE AVENUE
207 WEST SABAL PALM PLACE
MAITLAND FL 32779

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 607.0505 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: Randall R. Birchmier RANDALL R. BIRCHMIER 4/15/96
Signature of New Registered Agent, if changing — Name of New Registered Agent, if changing — Date

12. OFFICERS AND DIRECTORS

TITLE	VDST	☐ DELETE
NAME	PHILLIPS, THOMAS, B	
STREET ADDRESS	1867 CORBETT RD	
CITY-ST-ZIP	ORLANDO FL	
TITLE	PD	☐ DELETE
NAME	BIRCHMIER, RANDALL, R	
STREET ADDRESS	207 WEST SABAL PALM PLC	
CITY-ST-ZIP	LONGWOOD FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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 TITLE	☐ Change	☐ Addition
2 NAME		
3 STREET ADDRESS		
4 CITY-ST-ZIP		
2 TITLE	☐ Change	☐ Addition
2 NAME		
2 STREET ADDRESS		
2 CITY-ST-ZIP		
3 TITLE	☐ Change	☐ Addition
3 NAME		
3 STREET ADDRESS		
3 CITY-ST-ZIP		
4 TITLE	☐ Change	☐ Addition
4 NAME		
4 STREET ADDRESS		
4 CITY-ST-ZIP		
5 TITLE	☐ Change	☐ Addition
5 NAME		
5 STREET ADDRESS		
5 CITY-ST-ZIP		
6 TITLE	☐ Change	☐ Addition
6 NAME		
6 STREET ADDRESS		
6 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is true and accurate, that my electronic 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 with an asterisk (*), or on an attachment with all other like empowered.

SIGNATURE: Randall R. Birchmier RANDALL R. BIRCHMIER 4/15/96 407 647-7445
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

CR2E034 (12/95)