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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

Corporation Name

DOCUMENT # S41568

(4)

BROWNING AND BECKER CONSTRUCTION, INC.

Principal Place of Business Mailing Address 1199 SW 5TH CT 1115 BASSWOOD PLACE **BOCA RATON FL 33432** WEST PALM BEACH FL 33414 HS 3. Date Incorporated or Qualified 3a. Date of Last Report 03/26/1991 07/25/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0259938 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees $Z_{\rm ID}$ Country Z_{10} Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes 25 Yes VNo 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BROWNING, JEFFERSON M. Street Address (P.O. Box Number is Not Acceptable) 82 1115 BASSWOOD PLACE WEST PALM BEACH FL 33414 83 84 City 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. Thereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. JEFFERSON M. BROWNING (12/95) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13 DELETE ☐ Addition TIPLE 1. 1 TITLE Change BROWNING, JEFFERSON M. NAME 1.2 NAME **CR2E034** 1115 BASSWOOD PLACE STREET ADDRESS 1.3 STREET ADDRESS WEST PALM BEACH FL DITY-ST-ZIP 1.4 CITY - \$1 - ZIP VTS DELETE THILE 2 1 TITLE Change Addition BECKER, RICK E. NAME 1199 SW 5TH CT STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 2.4 City - St - ZiP DELETE TITLE 3 1 THLE Change Addition NAME 3.2 NAME STREEL ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34 CITY - ST - ZIP DELETE TITLE Change 4 1 TITLE ☐ Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - 7IP DELETE TITLE 5 1 TIELE ☐ Change Addition

64 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119.07(3)(6). 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.

5.2 NAME

6 1 THLE

6.2 NAME

5.3 STREET ADDRESS

6 3 STREET ADDRESS

5.4 CiTY-ST-ZiP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

DITY-ST-ZiP

CITY-ST-7IP

DELETE

ORION M BROWNING 1-29-96 407-790-3224

Change

Addition