

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 ~~\$161.25~~

CORPORATION ANNUAL REPORT 1995	FLORIDA DEPARTMENT OF STATE Sandra B. Martham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S54691

1. Corporation Name

DAN LOWE CONSTRUCTION, INC.

Principal Place of Business

Mailing Address

38334 THEEL AVE.
ZEPHYRHILLS, FL 33540

2. Principal Place of Business

21 38334 THEEL AVE.

Suite, Apt #, etc

28. Mailing Address

26 SAME

Suite, Apt #, etc

22 27

City & State

23 ZEPHYRHILLS, FL 33540

City & State

Zip

24 33540

Country

25 HILLSBOROUGH

Zip

30

Country

9. Name and Address of Current Registered Agent

DAN LOWE
38334 THEEL AVE.
ZEPHYRHILLS, FL 33540

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 file if applicable

NOTE: Registered Agent signature required when translating)

DATE

12. OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES DAN LOWE 38334 THEEL AVE. ZEPHYRHILLS, FL 33540	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	000001 500810 -07/28/96-01031--006 *****43.75 *****43.75	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	V.PRES JAMES T. SEALEY 38334 THEEL AVE. ZEPHYRHILLS, FL 33540	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	TREASURER LORETTA LOWE 38334 THEEL AVE. ZEPHYRHILLS, FL 33540	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	SECRETARY DENNIS WILKES 7105 ASH ST. ZEPHYRHILLS, FL 33541	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

DAN LOWE PRES

Dan Lowe 6-28-96 813-788-2907

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

AMENDED!!!!!!