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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 02 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # \$69224

(1)

M. L. YOUNT BUILDING CONTRACTORS, INC.

Principal Place of Business Mailing Address 1216 NORWOOD AVE 1216 NORWOOD AVE CLEARWATER FL 34616 CLEARWATER FL 34616-4510 3. Date Incorporated or Qualified 3a. Date of Last Report 07/25/1991 05/01/1996 2, Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0283347 21 1216 NORWO od AV. 12/6/NORWOOD AVE, CLEARWAG Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing LEARWATER CLEARWATE Added to Fees Trust Fund Contribution 8. This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name YOUNT, MERLIN L 1216 NORWOOD AVE **B2** Street Address (P.O. Box Number is Not Acceptable) **CLEARWATER FL 34616** 83 64 City 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 fagure with, and accept the obligations of Section 607.0505, Florida Statutes. ICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6) ... DELETE 161.6 Change 1.1 TOTLE YOUNT, MERLIN L NAME 1.2 NAME 1216 NORWOOD AVE STREET ADDRESS 1.3 STREET ADDRESS **CLEARWATER FL** City - St - 7iP 1.4 CITY - ST - ZIP ☐ DELETE Addition TITLE 2.1 TITLE ☐ Change YOUNT, SCOTT G. NAME 2.2 NAME 1216 NORWOOD AVE STREET ADDRESS 2.3 STREET ADDRESS CLEARWATER FL CITY-ST-ZIP 2. 4 City-ST-ZIP TITLE DELETE Change Addition 3.1 TOTLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CHY-SI-ZIP 3.4. CITY-ST-ZIP DELETE Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - 7(P 4.4 CITY-ST-ZIP DELETE THEF 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADORESS CHTY-SI-ZIP 54 CITY-ST-ZIP DELETE Change Addition TILLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-76

SIGNATURE:

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. 21/11/2. YOUNT 4-24-97 813-461-9339

RECTOR Date Date