FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED AND FILED

95 MAY 10 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V71547** **(6)**

1. Corporation Name
COSPER CONSTRUCTION MANAGEMENT, INC.

Principal Place of Business
2196 MAIN ST., #A
DUNEDIN FL 34698

Mailing Address
2196 MAIN ST., #A
DUNEDIN FL 34698

DO NOT WRITE IN THIS AREA

3. Date Incorporated or Qualified: 10/15/1992
3a. Date of Last Report: 10/24/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
City, State, Zip — 22 / 27
County — 23 / 28
Country — 24 / 25 / 29 / 30

4. FEI Number: 59-3147042
Applied For
Not Applicable

5. Certificate of Status Desired: $8.75 Additional Fee Required

6. Factor Computer Generated Total Fund Contribution: $5.00 May Be Added to Fees

8. The corporation has adopted, for purposes of Section 607.0501, Florida Statutes, the following statement of business purpose:

9. Name and Address of Current Registered Agent
ROMAN, THOMAS A
2196 MAIN STREET
SUITE L
DUNEDIN FL 34698

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number Not Acceptable)
83
84 City: FL
85 Zip Code

11. Pursuant to the provisions of Section 607.0505, Florida Statutes, the undersigned corporation hereby designates the place enumerated below as its registered office in Florida and the name of the registered agent in Florida upon whom process may be served. Having accepted the appointment as registered agent, I hereby agree to act in this capacity and comply with the provisions of Section 607.0505, Florida Statutes.

Signature of Registered Agent

12. Officers and Directors

Title	PTD
Name	COSPER, THOMAS C., JR.
Address	2196 MAIN STREET, UNIT A
City, State, Zip	DUNEDIN FL 34698
Title	VSD
Name	COSPER, MARILYN A.
Address	2196 MAIN STREET, UNIT A
City, State, Zip	DUNEDIN FL 34698

13. Additional Officers and Directors

14. I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall constitute an affirmation under the penalties for perjury 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.

SIGNATURE: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF BUSINESS OFFICER OR DIRECTOR
THOMAS C. COSPER, JR. PRESIDENT

May 15, 1995 813-734-2600

0360101 CP