

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1998.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO RESTATE: \$376.)

PROFIT CORPORATION
 ANNUAL REPORT
 1996



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

DOCUMENT # **F95000006030 (9)**

1. Corporation Name

C & G BUILDERS, INC.

FILED

96 NOV 26 AM 10:00

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



REINSTATEMENT

Principal Place of Business Mailing Address
90 W LENHARDT RD **90 W LENHARDT RD**
PIEDMONT SC 29673 **PIEDMONT SC 29673**

2. Principal Place of Business
 21 **Piedmont, South Carolina**

2a. Mailing Address
 26 **90 West Lenhardt Road**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
 23 **Piedmont, South Carolina**

City & State
 28 **90 West Lenhardt Road**

Zip
 24 **29673**

Country
 25 **Greenville**

Zip
 29 **29673**

Country
 30 **Greenville**

3. Date Incorporated or Qualified
12/11/1995

3a. Date of Last Report

4. FEI Number
57-0897293

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 Fee

7. This corporation has liability for intangible tax under s. 199.032 Florida Statutes Yes No

8. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FINDLEY, EARL C
4881 NW 8TH AVE
GAINESVILLE FL 32605

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 607.0502 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 *Earl C Findley* DATE **11-18-96**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|--|---|--|
| TITLE | P <input type="checkbox"/> DELETE | 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | GEDOSCH, STEPHEN J | 1.2 NAME | 700002019037--0 |
| STREET ADDRESS | 481 OLD HUNDRED RD | 1.3 STREET ADDRESS | -12/04/96--01036--004 |
| CITY-ST-ZIP | PELZER SC 29680 | 1.4 CITY-ST-ZIP | ***225.00 ***225.00 |
| TITLE | <input type="checkbox"/> DELETE | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | --- | 2.2 NAME | = |
| STREET ADDRESS | --- | 2.3 STREET ADDRESS | 700002019037--0 |
| CITY-ST-ZIP | --- | 2.4 CITY-ST-ZIP | -12/04/96--01036--005 |
| TITLE | <input type="checkbox"/> DELETE | 3.1 TITLE | ***150.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | --- | 3.2 NAME | --- |
| STREET ADDRESS | --- | 3.3 STREET ADDRESS | --- |
| CITY-ST-ZIP | --- | 3.4 CITY-ST-ZIP | --- |
| TITLE | <input type="checkbox"/> DELETE | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | --- | 4.2 NAME | --- |
| STREET ADDRESS | --- | 4.3 STREET ADDRESS | --- |
| CITY-ST-ZIP | --- | 4.4 CITY-ST-ZIP | --- |
| TITLE | <input type="checkbox"/> DELETE | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | --- | 5.2 NAME | --- |
| STREET ADDRESS | --- | 5.3 STREET ADDRESS | --- |
| CITY-ST-ZIP | --- | 5.4 CITY-ST-ZIP | --- |
| TITLE | <input type="checkbox"/> DELETE | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | --- | 6.2 NAME | --- |
| STREET ADDRESS | --- | 6.3 STREET ADDRESS | --- |
| CITY-ST-ZIP | --- | 6.4 CITY-ST-ZIP | --- |

Steph J Gedosch

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Steph J Gedosch* **ENCLOSURE** DATE **11-10-96** **84/211-9503**
Signature and typed or printed name of business officer or director

CR2034 (3/96)