

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
 Jul 21 1998 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # P15962 (4)
 1. Corporation Name
 K.C. NUMMY GENERAL CONTRACTOR, INC.



Principal Place of Business: 240 MENDEL PARKWAY W. MONTGOMERY AL 36117
 Mailing Address: 240 MENDEL PARKWAY W. MONTGOMERY AL 36117

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 21 156 Mendel Pkwy. Suite, Apt. #, etc. 22
 City & State: 23 Montgomery, AL
 Zip: 24 36117 Country: 25
 2a. Mailing Address: 26 156 Mendel Pkwy. Suite, Apt. #, etc. 27
 City & State: 28 Montgomery, AL
 Zip: 29 36117 Country: 30

3. Date Incorporated or Qualified: 09/14/1987
 4. FEI Number: 63-0846257 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 Fees
 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
 CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION FL 33324

10. Name and Address of New Registered Agent
 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: 7-10-98
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
 TITLE: P NUMMY, K.C. [] DELETE
 NAME: NUMMY, JOHN A [] DELETE
 STREET ADDRESS: 1700 CELIA COURT
 CITY-ST-ZIP: MONTGOMERY AL 36106
 TITLE: S [] DELETE
 NAME: [] DELETE
 STREET ADDRESS: [] DELETE
 CITY-ST-ZIP: [] DELETE
 TITLE: [] DELETE
 NAME: [] DELETE
 STREET ADDRESS: [] DELETE
 CITY-ST-ZIP: [] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
 1.1 TITLE: [X] Change [] Addition
 1.2 NAME: [] Change [] Addition
 1.3 STREET ADDRESS: 156 Mendel Pkwy
 1.4 CITY-ST-ZIP: Montgomery, AL 36117
 2.1 TITLE: [X] Change [] Addition
 2.2 NAME: [] Change [] Addition
 2.3 STREET ADDRESS: 156 Mendel Pkwy.
 2.4 CITY-ST-ZIP: Montgomery, AL 36117
 3.1 TITLE: [] Change [] Addition
 3.2 NAME: [] Change [] Addition
 3.3 STREET ADDRESS: [] Change [] Addition
 3.4 CITY-ST-ZIP: [] Change [] Addition
 4.1 TITLE: [] Change [] Addition
 4.2 NAME: [] Change [] Addition
 4.3 STREET ADDRESS: [] Change [] Addition
 4.4 CITY-ST-ZIP: [] Change [] Addition
 5.1 TITLE: [] Change [] Addition
 5.2 NAME: [] Change [] Addition
 5.3 STREET ADDRESS: [] Change [] Addition
 5.4 CITY-ST-ZIP: [] Change [] Addition
 6.1 TITLE: [] Change [] Addition
 6.2 NAME: [] Change [] Addition
 6.3 STREET ADDRESS: 400002596864
 6.4 CITY-ST-ZIP: -07/23/98--01086--015
 ***150.00

14. I 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.

SIGNATURE: K.C. Nummy, Pres. 7-10-98

CR2E034 (5/98)