

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

FILED

**Jan 21 1997 8:00am
Secretary of State**

**PROFIT CORPORATION
ANNUAL REPORT
1997**



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

DOCUMENT # K58135 (0)

1. Corporation Name
LEE'S CONSTRUCTION OF VERO BEACH, INC.



Principal Place of Business: **185 15TH AVENUE VERO BEACH FL 32962**
Mailing Address: **185 15TH AVENUE VERO BEACH FL 32962-2794**

3. Date Incorporated or Qualified: **01/13/1989**
3a. Date of Last Report: **08/20/1996**

2. Principal Place of Business: 21
2a. Mailing Address: 26

4. FEI Number: **65-0104676**
Applied For: Not Applicable

Suite, Apt. #, etc.: 22
Suite Apt. #, etc.: 27

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

City & State: 23
City & State: 28

6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

Zip: 24
Country: 25
Zip: 29
Country: 30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CLARK, ROBERT C.
1836 14TH AVENUE
VERO BEACH FL 32960**

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

Signature required for principal and registered agent and the applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PSD	<input type="checkbox"/> DELETE
NAME	FRIESON, LEE	
STREET ADDRESS	185 15TH AVE.	
CITY-ST-ZIP	VERO BEACH FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	GUNTER, TOMMY	
STREET ADDRESS	2026 19ST	
CITY-ST-ZIP	VERO BCH FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	PYLANT, BRUCE	
STREET ADDRESS	2055 33RD AVE	
CITY-ST-ZIP	VERO BCH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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.

SIGNATURE: *Lee Frieson* **LEE FRIESON** 1-7-97 561-569-1780
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)