

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000042429

**Entity Name:** R S LUMMERT CONTRACTING, INC.

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

372 COCROFT RD  
MONTICELLO, FL 32344

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 550981  
DAVIE, FL 33355

**New Mailing Address:**

PO BOX 1067  
MONTICELLO, FL 32345

**FEI Number:** 27-2587691

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LUMMERT, R. SCOTT  
372 COCROFT RD  
MONTICELLO, FL 32344 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LUMMERT, R. SCOTT  
Address: PO BOX 1067  
City-St-Zip: MONTICELLO, FL 32345

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: R. SCOTT LUMMERT

P

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date