## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

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## **DOCUMENT # 410949**

Entity Name

REGISTER CONSTRUCTION & ENGINEERING, INC.



Principal Place of Business

Mailing Address

3730 NEW TAMPA HWY LAKELAND, FL 33815 U

3730 NEW TAMPA HWY LAKELAND, FL 33815 FILED Jan 10, 2007 08:00 AM Secretary of State



01042007

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-1419729

Applied For Not Applicable

5. Certificate of Status Desired

W

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

REGISTER, LESTER D 3730 NEW TAMPA HIGHWAY LAKELAND, FL 33815

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	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. the obligations of registered agent.	I am familiar with, and accept
SI	GNATURE	

(NOTE: Registered Agent signature required when reinstating)

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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 10. TITLE GARD, MARK J. NAME 5925 SPRING LAKE DRIVE STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33811 ST TITLE BUTLER, MIKE STREET ADDRESS 511 HOWARD AVE CITY-ST-ZIP LAKELAND, FL 33815 С TITLE NAME REGISTER, LESTER D. JR. STREET ADDRESS P.O. BOX 1278 CITY-ST-ZIP BOCA GRANDE, FL 33921 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if charged, or on an attachment with an addiges, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

MAN

863-686 7776

Daytima Pt