

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000001498

FILED
Jan 04, 2006
Secretary of State

Entity Name: LITHKO CONTRACTING, INC.

Current Principal Place of Business:

5353 HAMILTON-MIDDLETOWN PIKE
HAMILTON, OH 45011

New Principal Place of Business:

Current Mailing Address:

5353 HAMILTON-MIDDLETOWN PIKE
HAMILTON, OH 45011

New Mailing Address:

FEI Number: 43-1214734

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: BAKER, KENNETH R
Address: 343 WARWICK ROAD
City-St-Zip: HAMILTON, OH 45013

Title: V () Delete
Name: HOSSFELD, PERRY J
Address: 2500 HIXSON STREET
City-St-Zip: POWELL, OH 43065

Title: S () Delete
Name: BAKER, HAZEL A
Address: 353 WARWICK ROAD
City-St-Zip: HAMILTON, OH 45013

Title: PD () Delete
Name: STROBEL, ROBERT
Address: 15 BEACHWOOD CT
City-St-Zip: BATESVILLE, IN 47006

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ROBERT STROBEL

PD

01/04/2006

Electronic Signature of Signing Officer or Director

_____ Date