

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000002017

Entity Name: LSH CONSTRUCTION, INC.

FILED
Apr 05, 2007
Secretary of State

Current Principal Place of Business:

18 WALL STREET
CO R.S. RUTA, ESQ.
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

PO BOX 3826
ORLANDO, FL 32802

New Mailing Address:

FEI Number: 76-0548189

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUTA, R. S ESQ.
18 WALL STREET
ORLANDO, FL 32801 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: P () Delete
Name: HOWELL, L. S
Address: 451 CONSTELLATION BLVD. SUITE 408
City-St-Zip: LEAGUE CITY, TX 77573

Title: VP () Delete
Name: HOWELL, ASHLEY L
Address: 451 CONSTELLATION BLVD. SUITE 408
City-St-Zip: LEAGUE CITY, TX 77573

Title: SEC () Delete
Name: WATSON, SHELBY L
Address: 106 CR 253
City-St-Zip: NACOGDOCHES, TX 75965

Title: TRES () Delete
Name: HOWELL, ASHLEY L
Address: 451 CONSTELLATION BLVD. SUITE 408
City-St-Zip: LEAGUE CITY, TX 77573

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: L.S.HOWELL

P

04/05/2007

Electronic Signature of Signing Officer or Director

Date