

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F00000005878

FILED
Mar 14, 2002 8:00 AM
Secretary of State

Entity Name: LAGINAPPE CONSTRUCTION, INC.

Current Principal Place of Business:

540 MAIN STREET
BAY ST LOUIS, MO 39520

New Principal Place of Business:

540 MAIN STREET
BAY ST LOUIS, MS 39520

Current Mailing Address:

540 MAIN STREET
BAY ST LOUIS, MO 39520

New Mailing Address:

FEI Number: 72-1384626 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUMMERS, FORREST
306 129TH AVE E, UNIT #1
MADERIA BEACH, FL 33708 US

Name and Address of New Registered Agent:

SUMMERS, FORREST
12395 EVELYN AVENUE
PORT CHARLOTTE, FL 33981 US

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: _____

03/14/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCHMITT, MICHAEL
Address: 540 MAIN STREET
City-St-Zip: BAY ST LOUIS, MS

Title: ST () Delete
Name: SCHMITT, MARSHA
Address: 540 MAIN STREET
City-St-Zip: BAY ST LOUIS, MS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SCHMITT, MICHAEL
Address: 540 MAIN STREET
City-St-Zip: BAY ST LOUIS, MS 39520 US

Title: ST (X) Change () Addition
Name: SCHMITT, MARSHA
Address: 540 MAIN STREET
City-St-Zip: BAY ST LOUIS, MS 39520 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL SCHMITT

P

03/14/2002

Electronic Signature of Signing Officer or Director

Date