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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 14 1998 8:00am

Secretary of State

294-1964

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F93000001741 (8)

L.F. AMES GENERAL CONTRACTOR INC.

Principal Place of Business Mailing Address 11221 WINDSONG CT 11221 WINDSONG CT CLERMONT FL 34711 CLERMONT FL 34711 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/08/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3148911 21 26 Not Applicable Suite, Apt. #, etc. Suite. Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 28 Added to Fees Źip Country Ζıp Country 8. This corporation owes or has paid the current year Intangible Yes 24 30 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 AMES, LEONARD F JR 11221 WINDSONG CT 82 Street Address (P.O. Box Number is Not Acceptable) CLERMONT FL 34711 84 City 85 Zip Code Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered syent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familial with, and accept the objections of Section 607.0505 florida Statutes. SIGNATURE epstered agent and little if applicab (NOTE: Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (10/97 OFFICERS AND DIRECTORS 13. DELETE Change ___ Addition TITLE 11 TITLE AMES, LEONARD F JR 1.2 NAME 11221 WINDSONG CT STREET ADDRESS 1.3 STREET ADDRESS CLERMONT FL 34711 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY - ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE Change Addition TITLE 41 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITL€ NAME **5.2 NAME** STREET ADDRESS 5.3 STREET ADDRESS 5.4 CiTY-ST-ZIP CITY-\$T-ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplicmental annual 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 officer or director of the corporation Block 12 or Block 13 if changed