2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94094

Name:

Address:

City-St-Zip:

ANDERSON, THOMAS J MR.

6004 PIER PLACE DRIVE

LAKELAND, FL 33813

FILED Mar 04, 2006 Secretary of State

Entity Nan	ne: LIBERTY	STEEL ERECT	ORS, INC.				
Current Principal Place of Business:				New Princi	New Principal Place of Business:		
	MMONWEAL ⁻ D, FL 33868	TH AVE US					
Current Mailing Address:				New Mailir	New Mailing Address:		
	MMONWEAL ⁻), FL 33868	TH AVE US					
FEI Number:	59-2214171	FEI Number App	olied For()	FEI Number Not Appli	cable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:		
3435 BARL	CECELIA M. EY COURT), FL 33803	US					
The above in the State		submits this state	ement for the purp	oose of changing it	s register	red office or registered agent, or both,	
SIGNATUR							
		nic Signature of F	-			Date	
Election Can	npaign Financir	ng Trust Fund Conti	ribution ().				
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PRES (ANDREW, CE 3435 BARLEY LAKELAND, F	CT.		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	HARRIS, TIMO 4874 LAKE JU) Delete OTHY L JLIANNA RESERVE I E, FL 33823 US	DR	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title:	VP () Delete		Title:	CTRL	(X) Change () Addition	

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.

Name:

Address:

City-St-Zip:

PAUL, WEST A

530 N COMMONWEALTH AVE

POLK CITY, FL 33868

SIGNATURE: PAUL A. WEST **CTRL** 03/04/2006