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Feb 10 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **G05811** **(6)**

1. Corporation Name
L.A.T. CONSTRUCTION, INC.

Principal Place of Business	Mailing Address
6039 PINEHILL ROAD PORT RICHEY FL 34668 US	P.O. BOX 1027 P.O. BOX 1027 PORT RICHEY FL 34673-1027 US

3. Date Incorporated or Qualified: 10/25/1982
3a. Date of Last Report: 03/12/1996

2. Principal Place of Business
21 805 CARDINAL AVENUE
Suite, Apt. #, etc. 22
City & State 23 PALM HARBOR, FL
Zip 24 34683 Country 25 USA

2a. Mailing Address
26 805 CARDINAL AVENUE
Suite, Apt. #, etc. 27
City & State 28 PALM HARBOR, FL
Zip 29 34683 Country 30 USA

4. FEI Number: 59-2231533 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

THOMPSON, LARRY A.
6039 PINEHILL ROAD
PORT RICHEY FL 34668

10. Name and Address of New Registered Agent

81 Name: LARRY A. THOMPSON
82 Street Address (P.O. Box Number is Not Acceptable): 805 CARDINAL AVENUE
83
84 City: PALM HARBOR FL 85 Zip Code: 34683

11. 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 agent, 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Larry A Thompson — 2/3/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DST	☒ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	THOMPSON, PATRICIA		1.2 NAME		
STREET ADDRESS	6039 PINEHILL ROAD		1.3 STREET ADDRESS		
CITY-ST-ZIP	NEW PORT RICHEY FL		1.4 CITY-ST-ZIP		
TITLE	DP	☐ DELETE	2.1 TITLE	DP	☒ Change ☐ Addition
NAME	THOMPSON, LARRY		2.2 NAME	THOMPSON, LARRY A.	
STREET ADDRESS	6039 PINEHILL ROAD		2.3 STREET ADDRESS	805 CARDINAL AVENUE	
CITY-ST-ZIP	NEW PORT RICHEY FL		2.4 CITY-ST-ZIP	PALM HARBOR, FL 34683	
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (9/96)

14. I do hereby 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 supplemental 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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [illegible] LARRY A. THOMPSON
PRESIDENT 2/3/97 813-794-4616