

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 14, 2006 08:00 AM
Secretary of State

DOCUMENT # H24053

1. Entity Name
RIGGERS AND ERECTORS OF FLORIDA, INC.



Principal Place of Business
**2900 TUXEDO AVE
WEST PALM BEACH, FL 33405 US**

Mailing Address
**2900 TUXEDO AVE
WEST PALM BEACH, FL 33405 US**



04122006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2456874

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**LEWIS, STEVEN
12011 SW PINEAPPLE STREET
PALM CITY, FL 34990**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
LEWIS, ROBERT S.
#6 DRAKE DRIVE, HWY 107
GLENVILLE, NC 28736**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VP
LEWIS, STEVEN
12011 SW PINEAPPLE STREET
PALM CITY, FL 34990**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**S
MILLER, SUSAN
614 SE ATLANTIC DR.
LAKE WORTH, FL 33462**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

U00000507995
04/27/06-80085-008 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STEVEN LEWIS

4/12/06

361-683-5000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #