

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # H35486

1. Entity Name
LEE FOX CONSTRUCTION CO., INC.



Principal Place of Business
840 3RD AVE S.
TIERRA VERDE, FL 33715

Mailing Address
840 3RD AVE S.
TIERRA VERDE, FL 33715

FILED
Apr 07, 2004 08:00 AM
Secretary of State



04042004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2476162

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

FOX, PAUL
840 3RD AVE S.
TIERRA VERDE, FL 33715

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

U00000105380
04/07/04-80023-015 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	FOX, LEE
STREET ADDRESS	840 3RD AVENUE SO
CITY-ST-ZIP	TIERRA VERDE, FL
TITLE	DV
NAME	FOX, PAUL
STREET ADDRESS	840 3RD AVE S.
CITY-ST-ZIP	TIERRA VERDE, FL
TITLE	D
NAME	FOX, PAUL, JR.
STREET ADDRESS	840 3RD AVE S.
CITY-ST-ZIP	TIERRA VERDE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I 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 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: PAUL FOX
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-4-04 727-458-5553
Date Daytime Phone #