

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 06, 2005 8:00 am
Secretary of State

05-06-2005 90081 039 ***150.00

DOCUMENT # J30530

1. Entity Name
LAMBERT CONSTRUCTION OF TALLAHASSEE, INC.



Principal Place of Business
**919 OLD BAINBRIDGE RD.
TALLAHASSEE, FL 32303**

Mailing Address
**919 OLD BAINBRIDGE RD.
TALLAHASSEE, FL 32303**



01182005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2728096

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

**LAMBERT, JAMES W., JR.
3011 INGRESS RD.
TALLAHASSEE, FL 32303**

**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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	LAMBERT, JAMES W., JR.
STREET ADDRESS	3011 INGRESS RD.
CITY-ST-ZIP	TALLAHASSEE, FL
TITLE	DST
NAME	LAMBERT, RHONDA H.
STREET ADDRESS	3011 INGRESS RD.
CITY-ST-ZIP	TALLAHASSEE, FL
TITLE	VP
NAME	MOORE, GLEN O
STREET ADDRESS	2798 LAWRENCE ROAD
CITY-ST-ZIP	MARIANNA, FL 32446
TITLE	D
NAME	LAMBERT, JAMES W SR
STREET ADDRESS	2016 WINTHROP WAY
CITY-ST-ZIP	TALLAHASSEE WAY, FL 32312
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:

Rhonda Lambert
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/05
Date

850/224/2473
Daytime Phone #