

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



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

**FILED**  
**SECRETARY OF STATE**  
**DIVISION OF CORPORATIONS**  
**95 FEB 13 AM 11:18**

**DOCUMENT # K70809 (4)**  
1. Corporation Name  
**LEBEAU CONSTRUCTION, INC.**

Principal Place of Business Mailing Address  
**21202 OLEAN BLVD** **P.O. BOX 456**  
**SUITE C-1** **MURDOCK FL 33938-0456**  
**PORT CHARLOTTE FL 33952** **US**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21 1193 Enterprise Drive		26 Suite, Apt. #, etc.		03/03/1989	03/25/1994
22 Suite A-4		27 City & State		4. FEI Number	Applied For
23 Port Charlotte, Fl.		28 City & State		65-0109677	Not Applicable
24 33953		25 Charlotte		5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
29		30		6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
				8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
HEEKIN, JOHN CHARLES 21202 C-2 OLEAN BLVD. PORT CHARLOTTE FL 33952				B1	Name		
				B2	Street Address (P.O. Box Number is Not Acceptable)		
				B3			
				B4	City	FL	B5

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 \_\_\_\_\_

(Signature, typed or printed name of registered agent and the 4 applicable)

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEBEAU, ALAN L.	1.2 NAME	
STREET ADDRESS	21202 OLEAN BLVD., SUITE C-1	1.3 STREET ADDRESS	1193 Enterprise Drive
CITY - ST - ZIP	PORT CHARLOTTE FL	1.4 CITY - ST - ZIP	Port Charlotte, Fl. 33953
TITLE	D	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEBEAU, DEBRA A.	2.2 NAME	
STREET ADDRESS	21202 OLEAN BLVD., SUITE C-1	2.3 STREET ADDRESS	1193 Enterprise Drive
CITY - ST - ZIP	PORT CHARLOTTE FL	2.4 CITY - ST - ZIP	Port Charlotte, Fl. 33953
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.01(3)(b), 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 the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: Alan L. LeBeau President

02/-/95  
(Signature Printed)