## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE

## Apr 28, 2005 8:00 am Secretary of State DOCUMENT # L54687 04-28-2005 90173 002 \*\*\*158.75 STEINMETZ CONSTRUCTION & DEVELOPMENT, INC. Principal Place of Business Mailing Address 14000. 108 S OLD DIXIE HWY 108 S OLD DIXIE HWY LADY LAKE, FL 32159 LADY LAKE, FL 32159 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04232005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 59-3057965 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent STEINMESZ, LEO P. 108 S OLD DIXIE HWY LADY LAKE, FL 32159 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 mue \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution After May 1, 2005 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PΩ Delete TITLE STEINMETZ, LEO P. NAME MAME STREET ADDRESS 3718 LAKE GRIFFIN RD. STREET ADDRESS 32159 CITY-ST-ZIP LADY LAKE, FL CITY-ST-ZIP TITLE Delete TITLE Addition STEINMETZ, NANCY P. NAME NAME STREET ADDRESS 3718 LAKE GRIFFIN RD. STREET ADDRESS COY-ST-ZIF LADY LAKE, FL CITY-ST-7IP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITI F **Addition** NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 2159 TITLE Delete mie ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TEDE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 addirection, with all other like empowered.

**FILED**