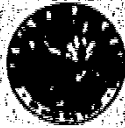


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # M96032 (1)
1. Corporation Name
LASETER ENGINEERING & CONSTRUCTION, INC.

**APPROVED
AND
FILED**

95 APR 19 PM 4:22

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business

**1030 E JEFFERSON ST
BROOKSVILLE FL 34001
US**

Mailing Address

**1030 E JEFFERSON ST
BROOKSVILLE FL 34001
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/26/1988

3a. Date of Last Report

03/31/1994

4. FEI Number

59-2976070

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

**\$0.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

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

7. This corporation has liability for intangible tax under S. 189.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**LASETER, BOBBY R.
1020 E JEFFERSON ST
10010 DOMINGO DRIVE
BROOKSVILLE FL 34601**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83. **10047 Domingo Drive.**

84. City

FL

85. Zip Code

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD**
NAME **LASETER, BOBBY R.**
STREET ADDRESS **10010 DOMINGO DR.**
CITY - ST - ZIP **BROOKSVILLE FL**

TITLE **VD**
NAME **LASETER, BOBBIE JO**
STREET ADDRESS **10010 DOMINGO DRIVE**
CITY - ST - ZIP **BROOKSVILLE FL**

TITLE **VSTD**
NAME **LASETER, LOIS ANNE**
STREET ADDRESS **308 ALPINE CIRCLE**
CITY - ST - ZIP **BROOKSVILLE FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

10047 Domingo Dr.

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

10047 Domingo Dr.

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

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 110.07(3)(k), 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 this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Bobby R. Laseter
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/95

Date

904-799-5714

Daytime Phone #