2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2005
Secretary of State

DOCUMENT# P01000034041

Entity Name: LYONS HOE EXCAVATING, INC.

Current Principal Place of Business:

19309 GARDEN QUILT CIRCLE
LUTZ, FL 33558

New Principal Place of Business:

16105 NORTH FLORIDA AVE
SUITE D
LUTZ, FL 33549

Current Mailing Address:

19309 GARDEN QUILT CIRCLE
LUTZ, FL 33558

New Mailing Address:

16105 NORTH FLORIDA AVE
SUITE D
LUTZ, FL 33549

FEI Number: 59-3714826 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THE STITZEL LAW GROUP
206 NORTH COLLINS STREET
PALNT CITY, FL 33566 US

Name and Address of New Registered Agent:

LAW OFFICE OF THAMIR A.R. KADDOURI P.A.
2107 W. CASS STREET
SUITE C
TAMPA, FL 33606 US

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.

SIGNATURE: THAMIR A.R. KADDOURI, JR. 03/25/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LYONS, EDWARD L
Address: 19309 GARDEN QUILT CIRCLE
City-St-Zip: LUTZ, FL 33558

Title: VP ( ) Delete
Name: LYONS, DEANNA R
Address: 19309 GARDEN QUILT CIRCLE
City-St-Zip: LUTZ, FL 33558

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: LYONS, EDWARD L
Address: 16105 NORTH FLORIDA AVE., SUITE D
City-St-Zip: LUTZ, FL 33549

Title: VP (X) Change ( ) Addition
Name: LYONS, DEANNA R
Address: 16105 NORTH FLORIDA AVE., SUITE D
City-St-Zip: LUTZ, FL 33549

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEANNA R. LYONS VP 03/25/2005
Electronic Signature of Signing Officer or Director Date