2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P02000101209

1. Entity Name
LIGHTNING CONSTRUCTION SERVICES, INC.

Principal Place of Business	Mailing Address
5710 18TH ST W BRADENTON, FL 34207	5710 18TH ST W BRADENTON, FL 34207

DO NOT WRITE IN THIS SPACE

03272008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
65-1072627	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MOORE, STEPHANIE
5710 18TH ST W
BRADENTON, FL 34207

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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 _____ Stephanie Moore _____   DATE 3 - 27 - 08

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)

· FILE NOW!!! FEE IS $150.00 ·
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing.
Trust Fund Contribution. ☐   **$5.00** May Be - Added to Fees

U00000875601
04/11/00 00041 005 150.00

10. OFFICERS AND DIRECTORS

TITLE	PSTD
NAME	MOORE, STEPANIE
STREET ADDRESS	5710 18TH ST W
CITY-ST-ZIP	BRADENTON, FL 34207
TITLE	VP
NAME	MOORE, STEPANIE
STREET ADDRESS	5710 18TH ST W
CITY-ST-ZIP	BRADENTON, FL 34207
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____ Moore _____   3-27- 08   (941) 753-7012

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #