

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000083985

1. Entity Name

L&H RENOVATIONS, INC.



Principal Place of Business

545-3 S DELANEY AVE
ORLANDO FL 32801

Mailing Address

545-3 S DELANEY AVE
ORLANDO FL 32801

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

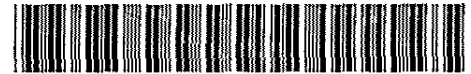
3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



1st MOORE

CR2E034 (10/04)

4. FEI Number
20-0129082

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

LEFFLER, TIMONTY M
545-3 S DELANEY AVE
ORLANDO FL 32801

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
D
LEFFLER, TIMOTHY M
1301 KELSO BLVD
WINDERMERE FL 34786-7503 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
D
HEANEY, SEAN M
11214 LAKE BUTLER BLVD
WINDERMERE FL 34786-7810 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Delete

TITLE
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☐ Delete

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CITY- ST- ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY- ST- ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition
U00000350714
05/02/05-80115-018 150.00

TITLE
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☐ Change ☐ Addition

TITLE
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CITY- ST- ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

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 address, with an officer or trustee empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #