

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000107736

Entity Name: LOCKE CONSTRUCTION, INC.

**FILED**  
**Feb 17, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

4 ARLINGTON DRIVE  
CAPE HAZE, FL 33946

**New Principal Place of Business:**

**Current Mailing Address:**

4 ARLINGTON DR  
PLACIDA, FL 33946

**New Mailing Address:**

4 ARLINGTON DRIVE  
CAPE HAZE, FL 33946

FEI Number: 76-0743674

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

LOCKE, MARKUS L  
4 ARLINGTON DRIVE  
CAPE HAZE, FL 33946 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PT  
Name: LOCKE, MARKUS L  
Address: 4 ARLINGTON DRIVE  
City-St-Zip: CAPE HAZE, FL 33946

Title: VP  
Name: LOCKE, MARTHA LETICIA  
Address: 4 ARLINGTON DRIVE  
City-St-Zip: CAPE HAZE, FL 33946

I hereby 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 all other like empowered.

SIGNATURE: MARKUS L LOCKE

PRES

02/17/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date