

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P93000088123 (3)

1. Corporation Name

LIECHTY CONSTRUCTION CO. INC.



Principal Place of Business

5000 MOBILE HIGHWAY  
PENSACOLA FL 32506

Mailing Address

5000 MOBILE HIGHWAY  
PENSACOLA FL 32506

2. Principal Place of Business

2a. Mailing Address

21 26416 Frank Road  
Suite, Apt. #, etc.

26 26416 Frank Road  
Suite, Apt. #, etc.

22 City & State  
23 Elberta, Alabama  
24 Zip 36530  
25 Country Baldwin

27 City & State  
28 Elberta, Alabama  
29 Zip 36530  
30 Country Baldwin

9. Name and Address of Current Registered Agent

LIECHTY, STEVEN  
5000 MOBILE HIGHWAY  
PENSACOLA FL 32506

3. Date Incorporated or Qualified

12/17/1993

3a. Date of Last Report

05/01/1995

4. FET Number

59-3232437

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution



\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

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 re-appointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	LIECHTY, STEVEN	
STREET ADDRESS	6497 MEMPHIS AVE.	
CITY-ST-ZIP	PENSACOLA FL 32526	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	LIECHTY, NANCY	
STREET ADDRESS	6497 MEMPHIS AVE.	
CITY-ST-ZIP	PENSACOLA FL 32526	
TITLE	V	<input type="checkbox"/> DELETE
NAME	LIECHTY, TODD	
STREET ADDRESS	1004 EDISON DRIVE	
CITY-ST-ZIP	PENSACOLA FL 32506	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Liechty, Steven	
1.3 STREET ADDRESS	26416 Frank Road	
1.4 CITY-ST-ZIP	Elberta, Alabama 36530	
2.1 TITLE	ST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Liechty, Nancy	
2.3 STREET ADDRESS	26416 Frank Road	
2.4 CITY-ST-ZIP	Elberta, Alabama 36530	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 119.07(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Steven Liechty*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Steven Liechty

4/5/96

Date

(334)  
986-3747

Daytime Phone #

CR2E034 (12/95)