

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P94000087578 (8)**

1. Corporation Name

LEE & CATES CONTRACT, INC.



Principal Place of Business

**142 MADISON ST.
JACKSONVILLE FL 32204**

Mailing Address

**P.O. BOX 41146
JACKSONVILLE FL 32203**

3. Date Incorporated or Qualified
11/30/1994

3a. Date of Last Report
03/02/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

59-3295349

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**BRANT MOORE SAPP MACDONALD & WELLS, P.A.
50 NORTH LAURA ST.
SUITE 3100
JACKSONVILLE FL 32201**

10. Name and Address of New Registered Agent

81. Name

THOMAS D. LEE III

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

83. City

142 Madison St.

84. State

Jacksonville

FL

85. Zip Code
32204

11. Pursuant to the provisions of Sections 607.0502 and 607.1502, 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 607.0503, Florida Statutes.

SIGNATURE: **Thomas D. Lee III (Pres)**

Thomas D. Lee III

4-22-96

12. OFFICERS AND DIRECTORS

TITLE

D

NAME

LEE, THOMAS D JR.

STREET ADDRESS

142 MADISON ST.

CITY - ST - ZIP

JACKSONVILLE FL 32204

TITLE

D

NAME

PADGETT, RICK Z

STREET ADDRESS

142 MADISON ST.

CITY - ST - ZIP

JACKSONVILLE FL 32204

TITLE

D

NAME

PADGETT, MARY MAUDE

STREET ADDRESS

142 MADISON ST.

CITY - ST - ZIP

JACKSONVILLE FL 32204

TITLE

D

NAME

LEE, THOMAS D JR

STREET ADDRESS

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STREET ADDRESS

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CITY - ST - ZIP

JACKSONVILLE FL 32204

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

CD

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

VPD

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

STD

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

P

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

**200001800642
-04/30/96--01018--013
***200.00**

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:

MAUDE PADGETT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-20-96

904-354-4685

CR2E034 (12/95)

4/28/96