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PROFIT CORPORATION ANNUAL REPORT

1997

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NAME STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 18 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000008529 (6)

LEE COUNTY CONSTRUCTION, INC.

Mailing Address Principal Place of Business 1463 SANDRA DRIVE 1463 SANDRA DRIVE FORT MYERS FL 33901-5833 FORT MYERS FL 33901 3a. Date of Last Report 3. Date Incorporated or Qualified 01/27/1995 06/12/1996 2. Principal Place of Business 4. FEI Number 28. Mailing Address Applied For 65-0547290 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 🗶 Yes 🗌 No 24 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name KOPRIVA, TERRY L 1463 SANDRA DRIVE Street Address (P.O. Box Number is Not Acceptable) FORT MYERS FL 33901 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 agold and title if applicable (NOT): Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition DELETE 1.1 TITLE TITLE KOPRIVA, TERRY L 1.2 NAME NAME 1463 SANDRA DRIVE 1.3 STREET ADDRESS STREET ADDRESS FORT MYERS FL 33901 1.4 CITY - \$1 - ZIP CITY-ST-ZIP Change Addition DELETE TITLE 2.11016 NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY - ST- ZIP CITY-ST-ZIP Change Addition DELETE 3.11016 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-S1-7IF CITY-ST-ZIP TT DELETE Change Addition 4.1 10116 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 5.1 7111.6 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 COLY - \$1 - 20° CITY-ST-ZIP Addition __ Change DELETE 6.1 1111.6 TITLE

14. I do hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). 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.

TERRY 1. KOPRTVA TERRY L. KOPRIVA 04/04/97 (941) 337-1013 PRESIDENT

6.2 NAME

6.3 STREET ADDRESS