✓ FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortigem 🗼 🕽 Secretary of State

DIVISION OF CORPORATIONS

1997 DOCUMENT #

P950000 28495

LAKE CONSTRUCTION SERVICES, INC.

Principal Place of Business

Mailing Address

P. . . 80x 491494 Leesburg, FC

FILED

Sep 25 1997 8:00am

Secretary of State

					1-11-3	1 1	~ & (CT) /
2. Principal Place of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		Applied For
709 Lincoln Ave	26				9-331 1278		Not Applicable
Sulte, Apt. #, etc.	Suite, Apt. #, etc.	ł			Certificate of Status Desired		\$8.75 Additional Fee Required
City & State Lesburg FL	City & State			1	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip Country 25	Zip 29	Country 30		0.	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
9. Name and Address of Curre	nt Registered Agent			10.	Name and Address of New F	legistere	d Agent
MARE A. Micha	+m		81	Name			
MARE A. Micha P. O. BOX 491494 Leesburg, FC 34	709 Lincola	u Ave	82	Street Address (P.0	O. Box Number is Not Accepte	able)	
Leesburg, FC 34	የጋሳ ፋ		83				
'\			84	City		F	L 85 Zip Code
 Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State agent. I am familiar with, and accept the oblig 	e of Florida. Such change was	s authorized	d by	the corporation's bo	submits this statement for the pard of directors. I hereby acc	purpose ept the a	e of changing its registered ppointment as registered

SIGNATURE	Jana a delin	9-22-8				
			c required when reinstating) DATE			
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRI	(
TITLE	President DELETE	11 TITLE	VIER-PRESIDENT	change 🗶 Addition		
NAME	MARE A. Michan	1.2 NAME	JAMES B. Thompson	ة المار		
STREET ADDRESS	709 Lincoln Ave	1.3 STREET ADDRESS	(0(N	- CANAL SH		
CITY-ST-ZIP	ceesburg FL 34748	1.4 CITY-ST-ZIP	Leesbung, FL 34740	J.		
TITLE	DELETE	2 1 TITLE		hange Addition C		
NAME	Daniel B. Hamalan	2.2 NAME				
STREET ADDRESS	40 +2 JANA F	23 STREET ADDRESS				
CITY-ST-ZIP	Lees buy and super	2 4 CITY - ST - ZIP				
TITLE	DELETE	3 1 1ITUE		change Addition		
NAME		3.2 NAME +)		
STREET ADDRESS		3 3 STREET ADDRESS				
CITY-ST-ZIP		3 4. CITY - ST - 7/P				
TITLE	☐ DELFTE	4.1 TULLE	, Dic	hange Addition		
NAME		4 2 NAME				
STREET ADDRESS		43 STREET ADDRESS				
CITY-ST-ZIP		4.4 CITY - S1 - 7IP				
TOLE	☐ DELETE	5 1 TITLE		hange Addition		
NAME		5.2 NAM(40000230552	4		
STREET ADDRESS		5.3 STREET ADDRESS	-09/29/9701004019	l,		
CITY-ST-ZIP		5.4 CITY - \$1 - ZIP	***61,25			
TITLE	☐ DELETE	61 HILE		change		

14. I do 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 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 composition or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 or Block 13 if changed, or on an equationment with an address.

STREET ADDRESS