

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

FILED

May 27 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000079821 (1)

1. Corporation Name

LAVOIE CONSTRUCTION CO.



Principal Place of Business

4370 S. TAMiami TRAIL
SUITE 400 100
SARASOTA FL 34231

Mailing Address

4370 S. TAMiami TRAIL
SUITE 400 100
SARASOTA FL 34231-3400

3. Date Incorporated or Qualified

10/18/1995

3a. Date of Last Report

05/29/1996

2. Principal Place of Business

SAME

2a. Mailing Address

SAME

21 Suite, Apt. #, etc.

100

26 Suite, Apt. #, etc.

100

22 City & State

SAME

27 City & State

SAME

23 Zip

SAME

Country

SARASOTA

28 Zip

SAME

Country

SARASOTA

4. FEI Number

65-0618717

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

9. Name and Address of Current Registered Agent

LAVOIE, RONALD C
4370 S. TAMiami TRAIL
SUITE 400 100
SARASOTA FL 34231

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME LAVOIE, RONALD C
STREET ADDRESS 4370 S. TAMiami TRAIL SUITE 400 100
CITY-ST-ZIP SARASOTA FL 34231

TITLE VP
NAME PIERRE R. LAVOIE
STREET ADDRESS 413 S. LATONIA
CITY-ST-ZIP KISSIMMEE FL

TITLE S
NAME WENDY LAVOIE
STREET ADDRESS 4186 MOSS OAK PLACE
CITY-ST-ZIP SARASOTA FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME LAVOIE, RONALD C.
1.3 STREET ADDRESS SUITE 100
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS 1844 MOVA ST.
2.4 CITY-ST-ZIP SARASOTA - FL 34231

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
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

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)