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

CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000008860 (4)

LEECO CONSTRUCTION SITE CLEAN-UP, INC.

Principal Plac 2005 SW 28T CAPE CORAL	'H TER.	Mailing Address 2005 SW 28TH TER. CAPE CORAL FL 331			· 1				
!						DO NOT WRITE IN TH	SSPACE		
[3. Date Incorporated or Qualified			
						01/19/1996			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		Ap	plied For
21						65-0644195		Not Applicable	
Suite, Apt.	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional equired
City & Stat	0	City & State				6. Election Campaign Financing Trust Fund Contribution			May Be o Fees
Ζιρ	Country	Zip	Co	untr	/	8. This corporation owes or has paid the	current ve	ar Int	angible
24	25	29	30			Personal Property Tax due June 30.	XXYes] No
	9, Name and Address of Curr	ent Registered Agent		7		10. Name and Address of New Registers	d Agent		
AD	KINS, DAVID R			81	Name				
				ļ	.				
2005 SW 28TH TER. CAPE CORAL FL 33914				82	Street Ad	dress (P.O. Box Number is Not Acceptable)			
				83					
				83	1				
				84	City	F	L 85	Zip (Code
11. Pursuant office or r agent. I a	to the provisions of Sections 607.0 registered agent, or both, in the Starm familiar with, and accept the obtains	502 and 607.1508, Florida State of Florida Such change vigations of Section 607.050	talutes, the a was authorize 5, Florida Sta	abov ed b	e-named co y the corpor s.	prporation submits this statement for the purpose ration's board of directors. I hereby accept the a	of chang ppointme	jing its int as	s registered registered
SIGNATURE	Signature, typed or printed name of registered a	agent and title if applicable	(NOTE Register	ed Ag	ent signature rec	suired when reinstating) DATE		<u></u>	
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A		CTOR	S IN 12
TITLE	DPST	DELETE		TITLE			Ch		Addition
NAME	ADKINS, DAVID R			NAME				•	_
STREET ADDRESS	2005 SW 28TH TER.				ADORESS				
	CAPE CORAL FL		•		1				
CITY-ST-ZIP TITLE	CAPE CORAL PL	DELETE			ST-ZIP		Lich	ange	Addition
				INTLE		<i>‡</i> +	L. 00	a∷Ne	L) MUUUUII
NAME			1 "	MAME	· ·				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				CITY-	ST-ZIP				
TITLE		☐ DELETE	3.1 7	TITLE			☐ Ch	ange	Addition
NAME			3.21	MAME					
STREET ADDRESS			3.3 9	STAEET	ADDRESS				
CITY-ST-ZIP			3.4	ÇITY-	ST-ZIP				
TITLE		☐ DELETE		ITLE			Ch	ange	Addition
NAME			4.2	NAME					
STREET ADORESS			435	TREFT	ADDRESS				
CITY-ST-ZIP					ST-ZIP				
0111-21-EIF		T ACIETY	9.4 (V111+5	DI-TIL		13.60		1.4450

CITY - ST - ZIP 64 CITY-ST-ZIP 14. I 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.

DAVID R. ADKINS

01/20/98

(941) 549–3347

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

6 3 STREET ADDRESS

5.4 CITY - ST - ZIP

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

01/20/98

FILED

Apr 20 1998 8:00am

Secretary of State

(941) 549-3347

Ad dition