

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 03, 1999 8:00 am  
Secretary of State

03-03-1999 90008 043 \*\*\*150.00

DOCUMENT # P96000044950

1. Corporation Name

LOHR CONSTRUCTION COMPANY

Principal Place of Business

8087 MONETARY DRIVE  
SUITE E-5  
RIVIERA BEACH FL 33404  
US

Mailing Address

8087 MONETARY DRIVE  
SUITE E-5  
RIVIERA BEACH FL 33404  
US

2. Principal Place of Business

21 1177 GEORGE BUSH BLVD

Suite, Apt. #, etc.

22 309

City & State

23 DELRAY BEACH, FL

Zip

24 33483

Country

25 US

2a. Mailing Address

26 1177 GEORGE BUSH BLVD

Suite, Apt. #, etc.

27 309

City & State

28 DELRAY BEACH, FL

Zip

29 33483

Country

30 US

9. Name and Address of Current Registered Agent

LOHR, A. CRAIG  
270 PINE AVENUE  
LAUDERDALE BY THE SEA FL 33308

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/20/1996

4. FEI Number

65-0690511

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 owes the current year Intangible  
Personal Property Tax.

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

LOHR, A. CRAIG

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

790 ANDREWS AVE C101

83

84 City

DELRAY BEACH

FL

85 Zip Code

33483

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 P ☐ DELETE

NAME LOHR, A. CRAIG  
STREET ADDRESS 270 PINE AVENUE  
CITY-ST-ZIP LAUDERDALE BY THE SEA FL 33308

TITLE T ☐ DELETE

NAME HOLL-CANNING, KIMERY  
STREET ADDRESS 57 PADDOCKS PATH  
CITY-ST-ZIP DENNIS MA 02638

TITLE S ☐ DELETE

NAME FLYNN, TERESA J  
STREET ADDRESS 47 INDIAN POND ROAD  
CITY-ST-ZIP WEST DENNIS MA 02670

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition

1.2 NAME LOHR, A. CRAIG  
1.3 STREET ADDRESS 790 ANDREWS AVE, C101  
1.4 CITY-ST-ZIP DELRAY BEACH, FL 33483

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 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)(f), 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/15/99 561-2780771

0361619

CR2E034 (11/98)