

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000003027

FILED  
May 02, 2006  
Secretary of State

Entity Name: CONSTRUCTION ENTERPRISES OF LEE COUNTY, INC.

**Current Principal Place of Business:**

1123 SE 1ST TERRACE  
CAPE CORAL, FL 33990

**New Principal Place of Business:**

16051 O'NEAL DR #1  
NORTH FORT MYERS, FL 33903

**Current Mailing Address:**

1123 SE 1ST TERRACE  
CAPE CORAL, FL 33990

**New Mailing Address:**

16051 O'NEAL DR #1  
NORTH FORT MYERS, FL 33903

FEI Number: 65-0723010

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SIMONETTI, CHRIS J  
1123 SE 1ST TERRACE  
CAPE CORAL, FL 33990 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SIMONETTI, CHRIS J  
Address: 1123 SE 1ST TERRACE  
City-St-Zip: CAPE CORAL, FL 33990

Title: V ( ) Delete  
Name: ADKISON, BENJAMIN A  
Address: 4033 SW 22ND STREET  
City-St-Zip: LEHIGH ACREOS, FL 33971

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: ADKISON, BENJAMIN A  
Address: 4033 24TH STREET SW  
City-St-Zip: LEHIGH ACRES, FL 33971

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRIS SIMONETTI

D

05/02/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date