

2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 06, 2005
Secretary of State**

DOCUMENT# P97000040947

Entity Name: L & L SITE WORK, INC.

Current Principal Place of Business:

6600 OLD MELBOURNE
SAINT CLOUD, FL 34771

New Principal Place of Business:

Current Mailing Address:

6600 OLD MELBOURNE
SAINT CLOUD, FL 34771

New Mailing Address:

P.O.BOX 700309
SAINT CLOUD, FL 34770

FEI Number: 59-3443002

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMB, WALLACE K III
6600 OLD MELBOURNE HWY
ST. CLOUD, FL 34771 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LAMB, WALLACE K III
Address: 6600 OLD MELBOURNE HWY
City-St-Zip: ST. CLOUD, FL 34771

Title: V () Delete
Name: LAMB, GWEN A
Address: 6600 OLD MELBOURNE HWY
City-St-Zip: ST CLOUD, FL 34771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GWEN LAMB

V

04/06/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date