


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 10, 2004 8:00 am
Secretary of State

09-10-2004 90006 013 ***158.75

DOCUMENT # P98000066804					
1. Entity Name LEE AND ASSOCIATES GENERAL CONTRACTORS, INC.					
Principal Place of Business 15040 SHAMROCK DRIVE SUITE 101 FORT MYERS, FL 33912			Mailing Address 15040 SHAMROCK DRIVE SUITE 101 FORT MYERS, FL 33912		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0853489	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LEE, DANIEL 15040 SHAMROCK DRIVE SUITE 101 FT MYERS, FL 33912			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>DANIEL LEE</u> <u>Daniel Lee</u> <u>Sept 8, 2004</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST LEE, DANIEL 15040 SHAMROCK DRIVE, #101 FORT MYERS, FL 33912		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Daniel Lee (Pres)</u> <u>Sept 8, 2004</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small> <u>DANIEL LEE</u>					

54072503



09012004 Chg-P CR2E034 (10/03)

Applied For
Not Applicable

FL

Zip Code

COPY

Attachment
54072503

P98000066804

LEE AND ASSOCIATES GENERAL CONTRACTORS, INC.
15040 SHAMROCK DRIVE
SUITE 101
FORT MYERS FL 33912

To Whom It May Concern,

Sept 8, 2004

We hereby state that;
Lee & Associates General Contractors, Inc.
did not receive notice of this
annual report being due by May 1,
pursuant to 607.193 (1) (b), Florida Statutes.

Therefore please waive the \$400.00
late fee

Sincerely,

Daniel Lee
(Pres)

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