

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000090126
 1. Entity Name
 LINCOLN CONSTRUCTION OF NAPLES, INC.



Principal Place of Business Mailing Address
 2666 AIRPORT ROAD SOUTH 2666 AIRPORT ROAD SOUTH
 NAPLES, FL 34112-4885 US NAPLES, FL 34112-4885 US



02072004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
 59-3539592 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 HIGGS, WILLIAM T
 2666 AIRPORT ROAD SOUTH
 NAPLES, FL 34112

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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 _____ (NOTE Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	HIGGS, WILLIAM T
STREET ADDRESS	2666 AIRPORT ROAD SOUTH
CITY-ST-ZIP	NAPLES, FL 341124885
TITLE	DVS
NAME	HIGGS, ANTONIA M
STREET ADDRESS	2666 AIRPORT ROAD SOUTH
CITY-ST-ZIP	NAPLES, FL 341124885
TITLE	T
NAME	LOIACANO, LISA F
STREET ADDRESS	2666 AIRPORT ROAD SOUTH
CITY-ST-ZIP	NAPLES, FL 341124885
TITLE	V
NAME	AGNELLI, JOHN J
STREET ADDRESS	2666 AIRPORT RD. SOUTH
CITY-ST-ZIP	NAPLES, FL 341124885
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

100000006887
 02/27/04-80051-009 150.00

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12. 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 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: Lisa F. Loiacano Date: 2/17/04 Daytime Phone #: 239-775-2230