

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Jesse B. Martinez
Secretary of State
JENNIFER M. DE LORENZO, ASST. SEC.

APPROVED
AND
FILED

DOCUMENT # **S77176** (3)

1. Corporation Name
LIGHTNER CONTRACTING, INC.

2. Principal Office (City and State)
**P O BOX 5189
IMMOKALEE FL 33934
US**

3. Mailing Address
**P O BOX 5189
IMMOKALEE FL 33934
US**

(PLEASE WRITE IN THIS SPACE)

2. Previous Period (Year)
21. **1994**

26. Mailing Address
27. **1994**

23. **1994**

24. **1994**

25. **1994**

29. **1994**

30. **1994**

3. Date Incorporated or Established
08/27/1991

36. Date of Last Report
03/31/1994

4. FEI Number
65-0287230

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 has been organized in compliance with Chapter 192, Florida Statutes.
 Yes No

9. Name and Address of Current Registered Agent

**QUEEN, JACK A.
211 N. 9TH STREET
IMMOKALEE FL 33934**

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City **FL** 85. Zip Code

11. The undersigned hereby certifies that the information furnished in this report is true and correct to the best of his or her knowledge and belief, and that the undersigned is a resident of the State of Florida and is qualified to act as a registered agent for the corporation named herein. The undersigned is a resident of the State of Florida and is qualified to act as a registered agent for the corporation named herein.

SIGNATURE

12. OFFICERS AND DIRECTORS

D
NAME: **QUEEN, JACK A.**
ADDRESS: **211 N. 9TH STREET
IMMOKALEE FL**

S
NAME: **LIGHTNER, R DAVID JR**
ADDRESS: **TRAFFORD FARMS RD
IMMOKALEE FL**

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

Change Addition
President

**4686 Trafford Farms Road
Immokalee, FL 33934**

Change Addition

Change Addition

Change Addition

14. I, the undersigned, certify that the information required with this filing is accurate, furnished and does not qualify for the exemption stated in Section 192.02(1)(b), Florida Statutes. I further certify that the information included in this annual report or supplemental filing report is true and correct and that my signature shall have the same legal effect as if the person had signed the report or supplemental filing report in person. I am a resident of the State of Florida and am qualified to act as a registered agent for the corporation named herein.

SIGNATURE: *R. David Lightner, Jr.*
SIGNATURE AND TYPED NAME OF SIGNING OFFICER OR DIRECTOR
R. David Lightner, Jr.

5/2/95

813/657-4300