## I hereby 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 all other like empowered.

#### SIGNATURE: JOHN F. BURT

Electronic Signature of Signing Officer/Director Detail

#### 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# P15000058819

#### Entity Name: LOCKRIDGE CONSTRUCTION CORPORATION

## **Current Principal Place of Business:**

2295 S. HIAWASSEE RD SUITE 304 ORLANDO, FL 32835

## **Current Mailing Address:**

2295 S. HIAWASSEE RD **SUIT 304** ORLANDO, FL 32835 US

## FEI Number: 47-4531529

## Name and Address of Current Registered Agent:

BURT, JOHN F 2295 S. HIAWASSEE RD. SUITE 304 ORLANDO, FL 32835 US

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	NATURE: JOHN F. BURT				
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	Р	Title	VP		
Name	BURT, JOHN W	Name	BURT, JOHN F		
Address	8001 LOCKRIDGE COURT	Address	11836 WOODMAR STREET		
City-State-Zip:	ORLANDO FL 32835	City-State-Zip:	CEDAR LAKE IN 46303		

	P	Title	VP			
	BURT, JOHN W	Name	BURT, JOHN F			
	8001 LOCKRIDGE COURT	Address	11836 WOODMAR STREET			
e-Zip:	ORLANDO FL 32835	City-State-Zip:	CEDAR LAKE IN 46303			

# Certificate of Status Desired: No

FILED Apr 12, 2016 Secretary of State CC7685618903

VP