

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Murtram
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 11 2:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V24886** (6)
1. Corporate Name
LEE CONSTRUCTION OF PENSACOLA, INC.

Principal Place of Business: **2905 BARONNE ST PENSACOLA FL 32526 US**
Mailing Address: **2905 BARONNE ST PENSACOLA FL 32526 US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **03/26/1992** 3a. Date of Last Report: **04/19/1994**
4. FEI Number: **59-3160270** Applied For: Not Applicable:
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21. State: **FL** 22. City & State: **PENSACOLA FL** 23. Country: **US**
2a. Mailing Address: 26. State: **FL** 27. City & State: **PENSACOLA FL** 28. Country: **US**
24. Country: **US** 25. Country: **US** 29. Country: **US** 30. Country: **US**

9. Name and Address of Current Registered Agent
**LEE, MARSHAL W
2905 BARONNE ST
PENSACOLA FL 32526**

10. Name and Address of Now Registered Agent
81. Name: _____
82. Street Address (P.O. Box Number is Not Acceptable): _____
83. _____
84. City: _____ 85. Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0503, Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE: D	NAME: LEE, MARSHAL W STREET ADDRESS: 2905 BARONNE ST CITY, ST, ZIP: PENSACOLA FL	1. TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
2. TITLE: D	NAME: LEE, JANIS G STREET ADDRESS: 2905 BARONNE ST CITY, ST, ZIP: PENSACOLA FL	2. TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
3. TITLE: D	NAME: LEE, RICKY L. STREET ADDRESS: 164 VASSAR DR. CITY, ST, ZIP: PENSACOLA FL	3. TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
4. TITLE:	NAME: _____ STREET ADDRESS: _____ CITY, ST, ZIP: _____	4. TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
5. TITLE:	NAME: _____ STREET ADDRESS: _____ CITY, ST, ZIP: _____	5. TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
6. TITLE:	NAME: _____ STREET ADDRESS: _____ CITY, ST, ZIP: _____	6. TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
7. TITLE:	NAME: _____ STREET ADDRESS: _____ CITY, ST, ZIP: _____	7. TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
8. TITLE:	NAME: _____ STREET ADDRESS: _____ CITY, ST, ZIP: _____	8. TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032(1)(b), Florida Statutes. I further certify that the information included on this annual report or supplemental annual 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 on Block 12 or Block 13 of this report or on an attachment with an address.

SIGNATURE: *Janis G Lee* **JANIS G Lee** 4/11/95 904 455-4286
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR