2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 853719

FILED Feb 14, 2007 Secretary of State

Entity Name: BATES ENGINEERS/CONTRACTORS, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
210 AIRPORT RD.			210 AIRPORT RD.	210 AIRPORT RD	
P.O. BOX				BAINBRIDGE, GA 39817	
	GE, GA 3981	7	B/ 111 (B) (1B (B), G/ ()		
	lailing Addre		New Mailing Addre	ee.	
	_		New maning Addres	33.	
P.O. BOX	846 GE, GA 3981	0			
DAINDIND	OL, OA 3301	5			
FEI Number	: 58-0872699	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	Address of (Current Registered Agent:	Name and Address	of New Registered Agent:	
CT CORP	ORATION SYS	STEM			
	NE ISLAND R				
	ION, FL 33324				
The above	named entity	submits this statement for the n	irnoso of changing its register.	ed office or registered agent, or both,	
	e of Florida.	submits this statement for the pr	dipose of changing its register	ed office of registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Age	nt	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANG	SES TO OFFICERS AND DIRECTOR:	
Title:	*) Delete	Title:	() Change () Addition	
Name:	LEE, STEVEN		Name:		
Address:	LAKE DOUGLA		Address:		
City-St-Zip:	BAINBRIDGE (5A., GA 39819	City-St-Zip:		
Γitle:	VD () Delete	Title:	() Change () Addition	
Name:	WIGGINS, MIC	•	Name:	() Shangs () / hadisən	
Address:	1996 THOMAS		Address:		
City-St-Zip:	BAINBRIDGE (City-St-Zip:		
		,			
Γitle:) Delete	Title:	() Change () Addition	
Name:	BEERS, JOHN	R	Name:		
Address:	2008 LAKEWO	OD CT	Address:		
City-St-Zip:	BAINBRIDGE,	GA 39819	City-St-Zip:		
Title:	SEC () Delete	Title:	() Change () Addition	
Vame:	LEE, JASON M		Name:	() Change () Addition	
vame. Address:	210 AIRPORT		Address:		
City-St-Zip:	BAINBRIDGE,		City-St-Zip:		
orty-ot-∠ip:	DAINDRIDGE,	ON 09017	City-St-Zip.		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: STEVEN M LEE PRES 02/14/2007