

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 853719

FILED
Apr 01, 2008
Secretary of State

Entity Name: BATES ENGINEERS/CONTRACTORS, INC.

Current Principal Place of Business:

210 AIRPORT RD.
BAINBRIDGE, GA 39817

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 846
BAINBRIDGE, GA 39818

New Mailing Address:

FEI Number: 58-0872699 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LEE, STEVEN M.,
Address: LAKE DOUGLAS RD.
City-St-Zip: BAINBRIDGE GA., GA 39819

Title: VD () Delete
Name: WIGGINS, MICHAEL L.,
Address: 1996 THOMAS DRIVE
City-St-Zip: BAINBRIDGE GA, GA 39819

Title: VD () Delete
Name: BEERS, JOHN R
Address: 2008 LAKEWOOD CT
City-St-Zip: BAINBRIDGE, GA 39819

Title: SEC () Delete
Name: LEE, JASON M
Address: 210 AIRPORT ROAD
City-St-Zip: BAINBRIDGE, GA 39817

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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

PD

04/01/2008

Electronic Signature of Signing Officer or Director

_____ Date