

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 437818

FILED
Apr 15, 2011
Secretary of State

Entity Name: TRADITIONAL CONTRACTORS COMPANY

Current Principal Place of Business:

180 TOLLGATE BRANCH
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

180 TOLLGATE BRANCH
P O BOX 521761
LONGWOOD, FL 327521761 US

New Mailing Address:

180 TOLLGATE BRANCH
180 TOLLGATE BRANCH
LONGWOOD, FL 327521761 US

FEI Number: 59-1498923

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALDWIN, JOHN
500 HWY 17-92
FERN PARK, FL 32730 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

OFFICERS AND DIRECTORS:

Title: PD
Name: LOUGHRAN, NADINE
Address: 180 TOLLGATE BRANCH
City-St-Zip: LONGWOOD, FL

Title: T
Name: LOUGHRAN, NADINE
Address: 180 TOLLGATE BRANCH
City-St-Zip: LONGWOOD, FL

Title: DVP
Name: LOUGHRAN, LEO J
Address: 180 TOLLGATE BRANCH
City-St-Zip: LONGWOOD, FL 32750

Title: S
Name: LOUGHRAN, NADINE M.
Address: 180 TOLLGATE BRANCH
City-St-Zip: LONGWOOD, FL

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: LEO LOUGHRAN

DVP

04/15/2011

Electronic Signature of Signing Officer or Director

Date