

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 489470

Entity Name: BROADLEAF CONTRACTING, INC.

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

ASHVILLE ROAD
P. O. BOX 499
MONTICELLO, FL 32345

New Principal Place of Business:

Current Mailing Address:

ASHVILLE ROAD
P. O. BOX 499
MONTICELLO, FL 32345

New Mailing Address:

FEI Number: 59-1665315

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAYLOR, ANGELA K
1525 W LIVE OAK RD
MONTICELLO, FL 32344 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: P () Delete
Name: TAYLOR, GERALD
Address: 203 ASHVILLE HWY.
City-St-Zip: MONTICELLO, FL

Title: VP () Delete
Name: TAYLOR, PHILLIP J
Address: 203 ASHVILLE HWY.
City-St-Zip: MONTICELLO, FL 32344

Title: S () Delete
Name: TAYLOR, ANGELA
Address: 203 ASHVILLE HWY.
City-St-Zip: MONTICELLO, FL 32344

Title: T () Delete
Name: TAYLOR, STEADMAN K
Address: 203 ASHOILLE HWY
City-St-Zip: MONTICELLO, FL 32344

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TAYLOR, ANGELA
Address: 203 ASHVILLE HWY.
City-St-Zip: MONTICELLO, FL

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: ANGELA TAYLOR

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date