

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 493846

FILED
Apr 10, 2009
Secretary of State

Entity Name: C. W. ROBERTS CONTRACTING, INCORPORATED

Current Principal Place of Business:

3372 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 16279
TALLAHASSEE, FL 32317

New Mailing Address:

FEI Number: 59-1683951

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROBERTS, CHARLES W, III
15674 HALES PLACE PLANTATION ROAD
TALLAHASSEE, FL 32312 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: ROBERTS, CHARLES W., III
Address: 15674 HALES PLACE PLANTATION ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: VP () Delete
Name: ROBERTS, GEORGE A.
Address: 3510 FOXRUN BLVD
City-St-Zip: PANAMA CITY, FL 32408

Title: S () Delete
Name: LESLIE, JERRY
Address: 3222 FOLEY DRIVE
City-St-Zip: TALLAHASSEE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: LESLIE, JERRY
Address: 3222 FOLEY DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

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: CHARLES W. ROBERTS, III

PD

04/10/2009

Electronic Signature of Signing Officer or Director

Date