

# **2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 527159

**FILED**  
**Jul 28, 2011**  
**Secretary of State**

**Entity Name:** M.T.M. CONTRACTORS, INC.

**Current Principal Place of Business:**

6550 53 ST N  
PINELLAS PARK, FL 33781

**New Principal Place of Business:**

**Current Mailing Address:**

6550 53 ST N  
PINELLAS PARK, FL 33781

**New Mailing Address:**

**FEI Number:** 59-1724558

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TOCCALINO,GEORGE  
5652 BAYVIEW DRIVE  
SEMINOLE, FL 337727047 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: TOCCALINO,GEORGE  
Address: 5652 BAYVIEW DRIVE  
City-St-Zip: SEMINOLE, FL 33772

Title: STD  
Name: JOHN W MCVEY  
Address: 205 66TH STREET S  
City-St-Zip: ST PETERSBURG, FL 33707

Title: VP  
Name: ANTHONY G TOCCALINO  
Address: 10153 118TH WAY  
City-St-Zip: SEMINOLE, FL 33772

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: GEORGE TOCCALINO

PD

07/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date