

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 680134

FILED
Apr 11, 2008
Secretary of State

Entity Name: FLORIDA PLASTERING CONTRACTORS, INC.

Current Principal Place of Business:

944 COUNTRY CLUB BLVD., STE. 103
C/O DAVID W. PLAZEWSKI
CAPE CORAL, FL 33990

New Principal Place of Business:

Current Mailing Address:

944 COUNTRY CLUB BLVD., STE. 103
C/O DAVID W. PLAZEWSKI
CAPE CORAL, FL 33990

New Mailing Address:

FEI Number: 59-2007289

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLAZEWSKI, DAVID W.
944 COUNTRY CLUB BLVD. #103
CAPE CORAL, FL 33990 US

Name and Address of New Registered Agent:

PLAZEWSKI, DAVID W.
1520 NE 33RD LN
CAPE CORAL, FL 33909 US

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:

04/11/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PLAZEWSKI, DAVID W.,
Address: 944 COUNTRY CLUB BLVD. #103
City-St-Zip: CAPE CORAL, FL 33990

Title: SEC () Delete
Name: WHITE, MARY K MS
Address: 3304 SW 3RD AVE
City-St-Zip: CAPE CORAL, FL 33914

Title: DIR (X) Delete
Name: ROBERT JOSEPH PLAZEWSKI
Address: 628 WILDWOOD PKWY
City-St-Zip: CAPE CORAL, FL 33904

Title: DIR (X) Delete
Name: PLAZEWSKI, MARIE L MRS.
Address: 628 WILDWOOD PKWY
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DAVID W PLAZEWSKI,
Address: 944 COUNTRY CLUB BLVD. #103
City-St-Zip: CAPE CORAL, FL 33990

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: DAVID W PLAZEWSKI

P

04/11/2008

Electronic Signature of Signing Officer or Director

Date