

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 08, 2008
Secretary of State**

DOCUMENT# 730988

Entity Name: UNION CONTRACTORS AND SUBCONTRACTORS ASSOCIATION, INC.

Current Principal Place of Business:

1108 NORTH WHEELER STREET
PLANT CITY, FL 33563 US

New Principal Place of Business:

Current Mailing Address:

1108 NORTH WHEELER STREET
PLANT CITY, FL 33563 US

New Mailing Address:

FEI Number: 59-1900441 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PRESTON, TAYLOR H
1108 NORTH WHEELER STREET
PLANT CITY, FL 33563 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: STD () Delete
Name: PRESTON, TAYLOR H
Address: 5960 SWALLOW DRIVE
City-St-Zip: LAKELAND, FL 33809

Title: PD (X) Delete
Name: DAVIS, ROY
Address: 2620 KEYSVILLE ROAD
City-St-Zip: LITHIA, FL

Title: D () Delete
Name: FEDUCCIA, MICHAEL
Address: P. O. BOX 856
City-St-Zip: MULBERRY, FL 33860

Title: VD () Delete
Name: VARNUM, CONRAD
Address: 2620 KEYSVILLE RD.
City-St-Zip: LITHIA, FL 33547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: H PRESTON TAYLOR

Electronic Signature of Signing Officer or Director

STD

01/08/2008

Date