## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# F00000002215

WOODS, ROBERT A

3000 VALORIE LANE

MIDLAND, MI 48640

Name:

Address:

City-St-Zip:

FILED Aug 13, 2009 Secretary of State

Entity Na	me: R. ROES	E CONTRACTING CO., INC.					
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
	JRON RD. 'LIN, MI 48631						
Current Mailing Address:			New Mailing Address:				
PO BOX 1 KAWKAW	58 'LIN, MI 48631						
FEI Number	: 38-1886324	FEI Number Applied For()	FEI Number Not Appl	icable ( )	Certificate of Status Desi	red ( )	
Name and	l Address of C	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
1200 S PIN	PORATION SY NE ISLAND RO ION, FL 33324	)AD					
	e named entity e of Florida.	submits this statement for the p	ourpose of changing i	ts registered o	office or registered agen	t, or both,	
SIGNATUI		nic Signature of Registered Ag	ent		Date		
OFFICER	S AND DIREC	TORS:	ADDITION	S/CHANGES	TO OFFICERS AND D	IRECTORS:	
Title: Name: Address: City-St-Zip:	P ( ROESE, RICHA 3328 CATALINA BAY CITY, MI	A DRIVE	Title: Name: Address: City-St-Zip:	(	) Change()Addition		
Title: Name: Address: City-St-Zip:	KOLANEK, DA	/LIN RIVER DRIVE	Title: Name: Address: City-St-Zip:	KOLANEK, DA	VLIN RIVER DRIVE		
Title: Name: Address: City-St-Zip:	M ( ROESE, BENJA 501 KNIGHTS I TAMPA, FL 33	RUN AVE	Title: Name: Address: City-St-Zip:	ST (X WOODS, ROB 3000 VALORIE MIDLAND, MI	LANE		
Title:	ST (X	) Delete	Title:	(	) Change ()Addition		

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.

Name:

Address:

City-St-Zip:

SIGNATURE: DAVID C KOLANEK VΡ 08/13/2009