

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000004583

Entity Name: PRI CONSTRUCTORS, INC.

FILED
Apr 03, 2009
Secretary of State

Current Principal Place of Business:

3760 CONVOY STREET, STE 230
SAN DIEGO, CA 92111

New Principal Place of Business:

Current Mailing Address:

3760 CONVOY STREET, STE 230
SAN DIEGO, CA 92111

New Mailing Address:

FEI Number: 33-0367968

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: DP () Delete
Name: LOSCAVIO, FRANK J
Address: 13308 WYNGATE POINT
City-St-Zip: SAN DIEGO, CA 92130

Title: S () Delete
Name: CAMPBELL, WILLIAM T
Address: 6274 PASEO ELEGANCIA
City-St-Zip: CARLSBAD, CA 92009

Title: CD () Delete
Name: WALDEN, SHARI L
Address: 8231 CAMINO DEL ORO
City-St-Zip: LAJOLLA, CA 92037

Title: D () Delete
Name: WALDEN, DAVID A
Address: 8231 CAMINO DEL RIO
City-St-Zip: LAJOLLA, CA 92037

Title: V () Delete
Name: SMITH, CARLA M
Address: 890 S. WASHINGTON ST.
City-St-Zip: DENVER, CO 80209

Title: V () Delete
Name: CLARK, JEFFREY S
Address: 1732 CEREUS CT
City-St-Zip: CARLSBAD, CA 92011

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:

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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: WILLIAM T CAMPBELL

S

04/03/2009

Electronic Signature of Signing Officer or Director

Date