

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000003285

FILED
Apr 02, 2008
Secretary of State

Entity Name: KEENAN, HOPKINS, SUDER & STOWELL CONTRACTORS, INC.

Current Principal Place of Business:

5109 E. LA PALMA AVENUE
SUITE A
ANAHEIM, CA 92807

New Principal Place of Business:

Current Mailing Address:

5109 E. LA PALMA AVENUE
SUITE A
ANAHEIM, CA 92807

New Mailing Address:

FEI Number: 58-2279196 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

EHRlich, STEVEN E
5422 BAY CENTER DRIVE
SUITE 200
TAMPA, FL 33609 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: PD () Delete
Name: SUDER, DAVID P
Address: 5109 E. LA PALMA AVENUE
City-St-Zip: ANAHEIM, CA 92807

Title: VD (X) Delete
Name: MILLER, JEFFREY A
Address: 5109 E. LA PALMA AVENUE
City-St-Zip: ANAHEIM, CA 92807

Title: ST () Delete
Name: NORMAN, DENNIS
Address: 5109 E. LA PALMA AVENUE
City-St-Zip: ANAHEIM, CA 92807

Title: D () Delete
Name: KEENAN, MARK A
Address: 5422 BAY CENTER DRIVE
City-St-Zip: TAMPA, FL 33609

Title: VD () Delete
Name: CHERNE, PHILIP
Address: 5109 E. LA PALMA AVENUE
City-St-Zip: ANAHEIM, CA 92807

Title: () Delete
Name:
Address:
City-St-Zip:

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:

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

Title: P () Change (X) Addition
Name: SUDER, DAVID P P
Address: 5109 E LA PALMA AVENUE
City-St-Zip: ANAHEIM, CA 92807

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 P SUDER

P

04/02/2008

Electronic Signature of Signing Officer or Director

_____ Date