

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2005 8:00 am
Secretary of State

03-18-2005 90070 050 ***150.00

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1. Entity Name
CONTRACTORS CLUB, INC.



Principal Place of Business
107 ELLIOTT AVE.
MUSCLE SHOALS, AL 35661

Mailing Address
2701 MALL DRIVE
FLORENCE, AL 35630

50027601



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03142005

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

20-0732948

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KIMBROUGH, DAVID
4408 SW 34 TERRACE
DANIA BEACH, FL 33312

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE V ☒ Delete
NAME SCHRENKER, JERRY
STREET ADDRESS 22750 S. SHORE DRIVE
CITY-ST-ZIP LAND O LAKES, FL

TITLE Donald Russell Vice President ☒ Change ☐ Addition
NAME
STREET ADDRESS 7895 NE Hwy 17 - C82
CITY-ST-ZIP Arcadia, FL 34266

TITLE S ☒ Delete
NAME ROBERTSON, AMY C
STREET ADDRESS 107 ELLIOTT AVE.
CITY-ST-ZIP MUSCLE SHOALS, AL 35661

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PC ☐ Delete
NAME KIMBROUGH, DAVID
STREET ADDRESS 107 ELLIOTT AVE.
CITY-ST-ZIP MUSCLE SHOALS, AL 35661

TITLE President Secretary Treasurer ☒ Change ☐ Addition
NAME Kimbrough, David
STREET ADDRESS 107 Elliott Ave
CITY-ST-ZIP muscle shoals, AL 35661

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-15-05

Date

8639906448

Daytime Phone #