

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000000330

FILED
Jan 14, 2009
Secretary of State

Entity Name: ASSOCIATED BRIGHAM CONTRACTORS INCORPORATED

Current Principal Place of Business:

75 NORTH 900 WEST
BRIGHAM CITY, UT 84302

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 578
BRIGHAM CITY, UT 84302

New Mailing Address:

FEI Number: 87-0253167

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: BRADSHAW, MICHAEL JOHN
Address: 1668 E. LAKEVIEW
City-St-Zip: OGDEN, UT 84403

Title: VD () Delete
Name: VALENTINE, EDGAR TED
Address: 1077 MAPLE
City-St-Zip: BRIGHAM CITY, UT 84302

Title: VD () Delete
Name: MCBRIDE, KENT KERR
Address: 7677 S 4000 W
City-St-Zip: WELLSVILLE, UT 84339

Title: ST () Delete
Name: RACINE, DENNIS RAY
Address: 473 E. SURRAY RUN RD.
City-St-Zip: SALT LAKE CITY, UT 84107

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

SIGNATURE: DENNIS R. RACINE

ST

01/14/2009

Electronic Signature of Signing Officer or Director

Date